

FORM  
(11-5-86)

SIPP-5800

U.S. DEPARTMENT OF COMMERCE  
BUREAU OF THE CENSUS

SURVEY OF INCOME  
AND PROGRAM  
PARTICIPATION

1985 PANEL

WAVE 8 QUESTIONNAIRE

PGM  
6

1. Book

2. (cc 1)

3a. (cc 2)

b. (cc 3)

of

R.O. code

PSU

Segment

Serial

Sample

Check digit

Add. ID

4. (cc 17)

a. Entry Add. ID

b. PERSON Number (cc 18)

c. Name (cc 19a)

First

Middle initial

5. PERSON CHARACTERISTICS — Fill a,b,c, and d using the control card

a. Relationship code (cc 19b)

b. Date of birth (cc 24)

c. Sex code (cc 28)

d. Marital status code (cc 26a)

6. Interviewer identification

Code

Name

7. PERSON INTERVIEW STATUS

a. Interview

1 Self

2 Proxy

Noninterview

1 Type Z refusal

2 Type Z other

8. Date of interview for this person

Month

Day

9a. Interview time for this person

Initial visit

Callback visit

Start time

Finish time

b. Total interview time for this person

Minutes

10a. Interviewer edit time

Start time

Finish time

b. Total interviewer edit time

Minutes

11a. Pre-interview transcription time

Start time

Finish time

b. Total pre-interview time for transcription

Minutes

12. 1 Phone interview — Specify reason

CHECK ITEM N1

Does . . . 's person number begin with a "8"?

PGM 7

0900

1 Yes

2 No — SKIP to Section 1, item 1

CHECK ITEM N2

Was . . . missed when household members were listed for Wave 1?

0901

1 Yes — SKIP to Section 1, item 1

2 No

13a. On March 31, 1985, was . . . living in any of the kinds of places listed on this card? (SHOW FLASHCARD P)

0914

1 Yes

2 No — SKIP to Section 1, item 1, page 2

13b. Which code on this card represents the kind of place . . . was living in on March 31, 1985?

0916

1 Armed Forces barracks

2 Outside the United States

3 Nonhousehold setting

NOTES

INTRODUCTION

INTERVIEWER INSTRUCTIONS — Read introduction once to each respondent. Do not repeat to another respondent who was in the room when you earlier read the introduction.

(As I described during my last visit,) This survey is about the economic situation of people living in the United States. Most of the questions will be about . . . 's activities during . . . , and . . . . Here is a calendar that shows the 4 months we will be talking about. (Hand respondent Flashcard J.) [This time period is very important, so if you have any questions about what period is being referred to during the interview, please ask me.]

[We need the most accurate and complete information possible. Please think carefully about each question, search your memory and take your time in answering.] For some of the questions it will help to look up the answers by checking whatever records are available to you here. (GO TO CHECK ITEM N1.)

## Section 1 — LABOR FORCE AND RECIPIENCY

(SHOW FLASHCARD J )

- 1. During the 4-month period outlined on this calendar, that is, from (4 months ago) thru (Last month), did . . . have a job or business, either full time or part time, even for only a few days?**

Mark "Yes" for active duty in the Armed Forces, any temporary or part-time work, and work without pay in a family business or farm.

PGM 7

1000

- 1 ☐ Yes — Mark "Worked" (code 170) on ISS and SKIP to 4  
2 ☐ No

- 2a. Even though . . . did not have a job during this period, did . . . spend any time looking for work or on layoff from a job?**

1002

- 1 ☐ Yes  
2 ☐ No — SKIP to 3a

- b. Please look at the calendar. In which weeks was . . . looking for work or on layoff from a job? Please answer by giving the week number that appears to the right of each week on the calendar.**

Mark (X) all that apply.

1004

x5 ☐ ALL

1006

☐ 1

1018

☐ 7

1030

☐ 13

1008

☐ 2

1020

☐ 8

1032

☐ 14

1010

☐ 3

1022

☐ 9

1034

☐ 15

1012

☐ 4

1024

☐ 10

1036

☐ 16

1014

☐ 5

1026

☐ 11

1038

☐ 17

1016

☐ 6

1028

☐ 12

1040

☐ 18

- c. Could . . . have taken a job during any of those weeks if one had been offered?**

1042

- 1 ☐ Yes — SKIP to Check Item R1  
2 ☐ No

- d. What was the main reason . . . could not take a job during those weeks?**

1044

- 1 ☐ Already had a job  
2 ☐ Temporary illness  
3 ☐ School  
4 ☐ Other — Specify \_\_\_\_\_

Mark (X) only one.

### CHECK ITEM R1

Refer to item 2b.

Is the "ALL" box marked in 2b?

1046

- 1 ☐ Yes — SKIP to 9a, page 4  
2 ☐ No — SKIP to 3b

- 3a. Were there any weeks in the 4-month period when . . . wanted a job?**

1048

- 1 ☐ Yes — SKIP to 3c  
2 ☐ No — SKIP to Check Item R6, page 4

- b. I have recorded that there were weeks that . . . did not work or look for work. Did . . . want a job in those weeks?**

1050

- 1 ☐ Yes  
2 ☐ No — SKIP to 9a, page 4

- c. Could . . . have taken a job in those weeks if one had been offered?**

1052

- 1 ☐ Yes  
2 ☐ No — SKIP to 9a, page 4

- d. During the weeks that . . . wanted a job but was not looking for one, what was the main reason . . . was not looking?**

1054

- 1 ☐ Believes no work available in line of work or area  
2 ☐ Couldn't find any work  
3 ☐ Lacks necessary schooling, training, skills, or experience  
4 ☐ Employers think too young or too old  
5 ☐ Other personal handicap in finding job  
6 ☐ Can't arrange child care  
7 ☐ Family responsibilities  
8 ☐ In school or other training  
9 ☐ Ill health, physical disability  
10 ☐ Inadequate transportation  
11 ☐ Other — Specify \_\_\_\_\_  
x1 ☐ DK

SKIP to 9a, page 4

Mark (X) only one.

- 4. Did . . . have a job or business, either full or part time, during EACH of the weeks in this period?**  
**Note that the person did not have to work each week.**

1056

- 1 ☐ Yes  
2 ☐ No — SKIP to 6a

- 5a. Was . . . absent without pay from . . . 's job or business for any FULL weeks during the 4-month period?**

1058

- 1 ☐ Yes  
2 ☐ No — SKIP to 8a, page 4

- b. Please look at the calendar. In which weeks was . . . absent without pay? Please answer by giving the week number that appears to the right of each week on the calendar.**

1060

x5 ☐ ALL

1062

☐ 1

1074

☐ 7

1086

☐ 13

1064

☐ 2

1076

☐ 8

1088

☐ 14

1066

☐ 3

1078

☐ 9

1090

☐ 15

1068

☐ 4

1080

☐ 10

1092

☐ 16

1070

☐ 5

1082

☐ 11

1094

☐ 17

1072

☐ 6

1084

☐ 12

1096

☐ 18

Mark (X) all that apply.

- c. What was the main reason . . . was absent from . . . 's job or business during those weeks?**

1098

- 1 ☐ On layoff  
2 ☐ Own illness  
3 ☐ On vacation  
4 ☐ Bad weather  
5 ☐ Labor dispute  
6 ☐ New job to begin within 30 days  
7 ☐ Other — Specify \_\_\_\_\_

SKIP to 8a, page 4

Mark (X) only one.

# Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

(SHOW FLASHCARD J )

**6a. Please look at the calendar. In which weeks did ... have a job or business? Please answer by giving the week number that appears to the right of each week on the calendar.**

Mark (X) calendar below, "With a job or business." AND then mark appropriate box(es).

1100	<input type="checkbox"/> 1	1112	<input type="checkbox"/> 7	1124	<input type="checkbox"/> 13
1102	<input type="checkbox"/> 2	1114	<input type="checkbox"/> 8	1126	<input type="checkbox"/> 14
1104	<input type="checkbox"/> 3	1116	<input type="checkbox"/> 9	1128	<input type="checkbox"/> 15
1106	<input type="checkbox"/> 4	1118	<input type="checkbox"/> 10	1130	<input type="checkbox"/> 16
1108	<input type="checkbox"/> 5	1120	<input type="checkbox"/> 11	1132	<input type="checkbox"/> 17
1110	<input type="checkbox"/> 6	1122	<input type="checkbox"/> 12	1134	<input type="checkbox"/> 18

**b. Of those weeks that ... had a job or business, was ... absent from work for any full weeks without pay?**

1136 ☐ 1 Yes  
☐ 2 No — SKIP to 7a

**c. In which weeks was ... absent without pay?**

1138	<input type="checkbox"/> 1	1150	<input type="checkbox"/> 7	1162	<input type="checkbox"/> 13
1140	<input type="checkbox"/> 2	1152	<input type="checkbox"/> 8	1164	<input type="checkbox"/> 14
1142	<input type="checkbox"/> 3	1154	<input type="checkbox"/> 9	1166	<input type="checkbox"/> 15
1144	<input type="checkbox"/> 4	1156	<input type="checkbox"/> 10	1168	<input type="checkbox"/> 16
1146	<input type="checkbox"/> 5	1158	<input type="checkbox"/> 11	1170	<input type="checkbox"/> 17
1148	<input type="checkbox"/> 6	1160	<input type="checkbox"/> 12	1172	<input type="checkbox"/> 18

**d. What was the main reason ... was absent from ...'s job or business during those weeks?**

Mark (X) only one.

1174 ☐ 1 On layoff  
☐ 2 Own illness  
☐ 3 On vacation  
☐ 4 Bad weather  
☐ 5 Labor dispute  
☐ 6 New job to begin within 30 days  
☐ 7 Other — Specify ↓

**7a. I have marked that there were some weeks in this period in which ... did NOT have a job or business. During that week or weeks did ... spend any time looking for work or on layoff?**

1176 ☐ 1 Yes  
☐ 2 No — SKIP to 7e

**b. In which of these weeks was ... looking for work or on layoff from a job? Please answer by giving the week number that appears to the right of each week on the calendar.**

Mark (X) calendar below, "Looking for work or on layoff" AND then mark appropriate box(es).

1178 x5 ☐ All weeks without a job

1180	<input type="checkbox"/> 1	1192	<input type="checkbox"/> 7	1204	<input type="checkbox"/> 13
1182	<input type="checkbox"/> 2	1194	<input type="checkbox"/> 8	1206	<input type="checkbox"/> 14
1184	<input type="checkbox"/> 3	1196	<input type="checkbox"/> 9	1208	<input type="checkbox"/> 15
1186	<input type="checkbox"/> 4	1198	<input type="checkbox"/> 10	1210	<input type="checkbox"/> 16
1188	<input type="checkbox"/> 5	1200	<input type="checkbox"/> 11	1212	<input type="checkbox"/> 17
1190	<input type="checkbox"/> 6	1202	<input type="checkbox"/> 12	1214	<input type="checkbox"/> 18

**c. Could ... have taken a job during those weeks if one had been offered?**

1216 ☐ 1 Yes — SKIP to Check Item R2  
☐ 2 No

**d. What was the main reason ... could not take a job during those weeks?**

1218 ☐ 1 Already had a job  
☐ 2 Temporary illness  
☐ 3 School  
☐ 4 Other — Specify ↓

## CHECK ITEM R2

Refer to the Labor Force Calendar, below. Is each week of the 4-month period marked as "With a job or business" or "Looking for work or on layoff"?

1220 ☐ 1 Yes — SKIP to 8a  
☐ 2 No — SKIP to 7f

**7e. Did ... want a job in those weeks when ... did not have one?**

1222 ☐ 1 Yes — SKIP to 7g  
☐ 2 No — SKIP to 8a

**f. I have marked that there were weeks in this period when ... did not have a job and was not looking for a job. Did ... want a job in those weeks? If necessary, refer to Labor Force calendar.**

1224 ☐ 1 Yes  
☐ 2 No — SKIP to 8a

**g. Could ... have taken a job during those weeks if one had been offered?**

1226 ☐ 1 Yes  
☐ 2 No — SKIP to 8a

## LABOR FORCE CALENDAR — Use when item 4 is marked "No"

WEEK →	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
With a job or business. Mark for item 6a.																		
Looking for work or on layoff (and without a job or business.) Mark for item 7b.																		

## Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

**7h. During the weeks that . . . wanted a job but was not looking for one, what was the main reason . . . was not looking?**

Mark (X) only one.

**1228**

- 1 ☐ Believes no work available in line of work or area
- 2 ☐ Couldn't find any work
- 3 ☐ Lacks necessary schooling, training, skills, or experience
- 4 ☐ Employers think too young or too old
- 5 ☐ Other personal handicap in finding job
- 6 ☐ Can't arrange child care
- 7 ☐ Family responsibilities
- 8 ☐ In school or other training
- 9 ☐ Ill health, physical disability
- 10 ☐ Inadequate transportation
- 11 ☐ Other — Specify \_\_\_\_\_
- x1 ☐ DK

**8a. In the weeks that . . . worked during the 4-month period, how many hours did . . . usually work per week?**

**1230**

Hours per week

- x3 ☐ None
- x1 ☐ DK

} SKIP to Check Item R4

**CHECK  
ITEM R3**

Refer to item 8a.

Did . . . usually work 35 or more hours per week?

**1231**

- 1 ☐ Yes
- 2 ☐ No — SKIP to 8c

**8b. Did . . . work fewer than 35 hours in any of the weeks that . . . worked during this period? Exclude time off WITH PAY because of holidays, vacation, days off or sickness.**

**1232**

- 1 ☐ Yes
- 2 ☐ No — SKIP to Check Item R4

**c. How many weeks did . . . work fewer than 35 hours in the months of (Read each month)?**

**1233**

x5 ☐ All

**1234**

Weeks Last month

**1235**

Weeks 2 months ago

**1236**

Weeks 3 months ago

**1237**

Weeks 4 months ago

**d. What was the main reason . . . worked fewer than 35 hours in those weeks?**

Mark (X) only one.

**1238**

- 1 ☐ Could not find a full-time job
- 2 ☐ Wanted to work part time
- 3 ☐ Health condition or disability
- 4 ☐ Normal working hours are fewer than 35 hours
- 5 ☐ Slack work or material shortage
- 6 ☐ Other — Specify \_\_\_\_\_

**CHECK  
ITEM R4**

Refer to item 5a, page 2.

The response to item 5a is:

**1239**

- 1 ☐ Yes (or blank)
- 2 ☐ No — SKIP to Check Item R5

**9a. During this 4-month period, did . . . receive any State unemployment compensation payments?**

**1240**

- 1 ☐ Yes — Mark "5" on ISS
- 2 ☐ No — SKIP to Check Item R5

**b. During this period, did . . . also receive any Supplemental Unemployment Benefits (SUB)?**

**1242**

- 1 ☐ Yes — Mark "6" on ISS
- 2 ☐ No

**CHECK  
ITEM R5**

Is "Worked" (code 170) marked on the ISS?

**1244**

- 1 ☐ Yes
- 2 ☐ No — SKIP to Check Item R6

**10. During this 4-month period did . . . receive any money from worker's compensation for any kind of job-related illness or injury?**

**1246**

- 1 ☐ Yes — Mark "10" on ISS
- 2 ☐ No

**CHECK  
ITEM R6**

Was an interview obtained for . . . last reference period (cc items 44—47)?

**1248**

- 1 ☐ Yes
- 2 ☐ No — SKIP to Check Item R11, page 6

**CHECK  
ITEM R7**

Are any income types listed in the Income Roster (item 11b)?

**1250**

- 1 ☐ Yes
- 2 ☐ No — SKIP to 12a

NOTES

# Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

**11 a.** According to the information we obtained last time, . . . had received (Read income types in 11b, column (2)) during (8 months ago) through (5 months ago). Was this information recorded correctly?

1251

- 1 ☐ Yes  
2 ☐ No — Resolve problems and make appropriate entries in 11b, column (5)

Ask 11c

## b. INCOME ROSTER (ISS CODES 1—56)

Line No. (1)	Income type (2)	Income code (3)	This reference period (4)	Previous reference period (5)	
				Should not have been listed	Was not listed; should have been
1		1252 <input type="checkbox"/>	1254 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No	1255 1 <input type="checkbox"/>	2 <input type="checkbox"/>
2		1256 <input type="checkbox"/>	1258 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No	1259 1 <input type="checkbox"/>	2 <input type="checkbox"/>
3		1260 <input type="checkbox"/>	1262 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No	1263 1 <input type="checkbox"/>	2 <input type="checkbox"/>
4		1264 <input type="checkbox"/>	1266 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No	1267 1 <input type="checkbox"/>	2 <input type="checkbox"/>
5		1268 <input type="checkbox"/>	1270 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No	1271 1 <input type="checkbox"/>	2 <input type="checkbox"/>
6		1272 <input type="checkbox"/>	1274 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No	1275 1 <input type="checkbox"/>	2 <input type="checkbox"/>
7		1276 <input type="checkbox"/>	1278 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No	1279 1 <input type="checkbox"/>	2 <input type="checkbox"/>
8		1280 <input type="checkbox"/>	1282 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No	1283 1 <input type="checkbox"/>	2 <input type="checkbox"/>

**c.** At any time during the past 4 months, that is \_\_\_\_\_, and \_\_\_\_\_, did . . . get income from (Read income types in 11b, column (2))?

MARK (X) APPROPRIATE BOX IN ITEM 11b, COLUMN (4) FOR EACH INCOME TYPE LISTED.

**12 a.** At any time during this 4-month period, did . . . get any income from the Federal Government (that we haven't talked about)?

1284

- 1 ☐ Yes  
2 ☐ No — SKIP to 13a

**b.** What was it called?

Anything else?

Mark (X) all that apply.

1286

- 1 ☐ Social Security — Mark "1" on ISS

1288

- 2 ☐ Federal Supplemental Security Income (Federal SSI) — Mark "3" on ISS

1290

- 3 ☐ A serviceman's or widow's pension from the Veterans Administration (VA) — Mark "8" on ISS

1292

- 4 ☐ Anything else — Mark appropriate code on ISS and specify

1294

**13 a.** At any time during this 4-month period, did . . . receive any (other) pension, disability, retirement, or survivor income (that we haven't talked about)?

1296

- 1 ☐ Yes  
2 ☐ No — SKIP to Check Item R8

**b.** What was the source of this income?

Anything else?

Mark (X) all that apply.

1298

- 1 ☐ U.S. Government Railroad Retirement — Mark "2" on ISS

1300

- 2 ☐ Black Lung payments — Mark "9" on ISS

1302

- 3 ☐ Worker's Compensation — Mark "10" on ISS

1304

- 4 ☐ Payments from a sickness, accident or disability insurance policy purchased on your own — Mark "13" on ISS

1306

- 5 ☐ Pension from company or union — Mark "30" on ISS

1308

- 6 ☐ Federal Civil Service or other Federal civilian employee pension — Mark "31" on ISS

1310

- 7 ☐ U.S. Military retirement pay (exclude payments from the Veterans Administration) — Mark "32" on ISS

1312

- 8 ☐ National Guard or Reserve Forces retirement — Mark "33" on ISS

1314

- 9 ☐ State government pension — Mark "34" on ISS

1316

- 10 ☐ Local government pension — Mark "35" on ISS

1318

- 11 ☐ Income from paid-up life insurance policies or annuities — Mark "36" on ISS

1320

- 12 ☐ Other or DK — Specify and enter code from income source list. If income type is not listed or DK, enter code "38" — Mark ISS.

1322

**CHECK ITEM R8**

Is "Medicare" (code 172) marked for . . . on cc item 47?

1324

- 1 ☐ Yes — Mark "172" on ISS and SKIP to Check Item R23, page 8  
2 ☐ No

## Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

<b>CHECK ITEM R9</b>	Is "Disabled" (code 171) marked for ... on cc item 47?	<b>1326</b>	1 <input type="checkbox"/> Yes — Mark "171" on ISS and SKIP to 23a, page 8 2 <input type="checkbox"/> No
<b>CHECK ITEM R10</b>	Is ... 65 years of age or over?	<b>1328</b>	1 <input type="checkbox"/> Yes — SKIP to 23a, page 8 2 <input type="checkbox"/> No — SKIP to Check Item R23, page 8
<b>CHECK ITEM R11</b>	Refer to cc items 32a and 32c. Is ... a veteran of the U.S. Armed Forces? (Mark "No" if currently in Armed Forces.)	<b>1330</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to Check Item R12
<b>14a.</b>	How long did ... serve on active duty in the Armed Forces?	<b>1332</b>	1 <input type="checkbox"/> Less than 6 months 2 <input type="checkbox"/> 6 to 23 months 3 <input type="checkbox"/> 2 to 19 years 4 <input type="checkbox"/> 20 or more years x1 <input type="checkbox"/> DK
<b>b.</b>	Does ... have a service connected disability; that is, a health condition or impairment caused or made worse by military service?	<b>1334</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK } SKIP to 14d
<b>c.</b>	What is ...'s VA percent disability rating? Use the following probe if needed: (Such as 0, 10, 20, 30, 40, 50, 60, 70, 80, 90, 100%)	<b>1336</b>	<div style="display: flex; align-items: center;"> <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> Percent         <div style="margin-left: 20px;">           x3 <input type="checkbox"/> 0%            x1 <input type="checkbox"/> DK            x2 <input type="checkbox"/> Ref.            101 <input type="checkbox"/> No rating         </div> <div style="margin-left: 20px; font-size: 2em;">}</div> <div style="margin-left: 10px;">           Mark "200" on ISS if rating is 100%; otherwise, mark "201"         </div> </div>
<b>d.</b>	During this 4-month period did ... receive pension or compensation payments from the Veterans Administration? (Exclude regular military retirement pay, insurance proceeds, and GI Bill benefits.)	<b>1338</b>	1 <input type="checkbox"/> Yes — Mark "8" on ISS 2 <input type="checkbox"/> No
<b>CHECK ITEM R12</b>	Is ... 18 years of age or over?	<b>1340</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 18a
<b>15a.</b>	During this 4-month period, did ... receive any Social Security payments?	<b>1342</b>	1 <input type="checkbox"/> Yes — Mark "1" on ISS 2 <input type="checkbox"/> No — SKIP to Check Item R14
<b>CHECK ITEM R13</b>	Is ... 65 years of age or over?	<b>1344</b>	1 <input type="checkbox"/> Yes — SKIP to 16a 2 <input type="checkbox"/> No
<b>15b.</b>	What is the reason ... is getting Social Security, is it because ... is (Read categories) — Mark (X) only one.	<b>1346</b>	1 <input type="checkbox"/> Retired? 2 <input type="checkbox"/> Disabled? 3 <input type="checkbox"/> Widow(ed) or surviving child? 4 <input type="checkbox"/> Spouse or dependent child? 5 <input type="checkbox"/> Some other reason x1 <input type="checkbox"/> DK } SKIP to 16a
<b>c.</b>	Sometimes people get Social Security for more than one reason. Is there another reason ... receives Social Security?	<b>1348</b>	1 <input type="checkbox"/> Retired 2 <input type="checkbox"/> Disabled 3 <input type="checkbox"/> Widow(ed) or surviving child 4 <input type="checkbox"/> Spouse or dependent child 5 <input type="checkbox"/> No other reason x1 <input type="checkbox"/> DK } SKIP to 16a
<b>CHECK ITEM R14</b>	Refer to cc item 27. Is ... the designated parent or guardian of children under 18 who live in this household?	<b>1350</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 16a
<b>15d.</b>	During the 4-month period did ... receive any Social Security payments especially for ...'s children (under 18)?	<b>1352</b>	1 <input type="checkbox"/> Yes — Mark "1" on ISS 2 <input type="checkbox"/> No
<b>16a.</b>	During this 4-month period did ... receive any SSI (Supplemental Security Income) payments from the U.S. Government?	<b>1354</b>	1 <input type="checkbox"/> Yes — Mark "3" on ISS 2 <input type="checkbox"/> No — SKIP to Check Item R15
<b>b.</b>	Did ... also receive a SEPARATE SSI payment from the State or local welfare office during these months?	<b>1356</b>	1 <input type="checkbox"/> Yes — Mark "4" on ISS 2 <input type="checkbox"/> No
<b>CHECK ITEM R15</b>	Is ... 40 years of age or over?	<b>1358</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 18a
<b>17a.</b>	Has ... ever retired from a job or business? (Include retirement from the military.)	<b>1360</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to Check Item R16
<b>b.</b>	During the 4-month period did ... receive any retirement income other than Social Security?	<b>1362</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 17d

# Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

## 17c. What kind of retirement income?

Anything else?

Mark (X) all that apply.

- 1364 ☐ U.S. Government Railroad Retirement — Mark "2" on ISS
- 1366 ☐ Pension from company or union — Mark "30" on ISS
- 1368 ☐ Federal Civil Service or other Federal civilian employee pension — Mark "31" on ISS
- 1370 ☐ U.S. Military retirement pay (exclude payments from the Veterans Administration) — Mark "32" on ISS
- 1372 ☐ National Guard or Reserve Forces retirement — Mark "33" on ISS
- 1374 ☐ State government pension — Mark "34" on ISS
- 1376 ☐ Local government pension — Mark "35" on ISS
- 1378 ☐ Other or DK — Specify and enter code from income source list. If income type not listed or "DK," enter code "38" — Mark ISS
- 1380 ☐

## d. During this 4-month period, did . . . receive any regular income from a paid-up life insurance policy or any other annuities?

- 1382 ☐ Yes — Mark "36" on ISS
- ☐ No

## CHECK ITEM R16

Is . . . 70 years of age or over?

- 1384 ☐ Yes — SKIP to Check Item R17
- ☐ No

## 18a. Does . . . have a physical, mental, or other health condition which limits the kind or amount of work . . . can do?

- 1386 ☐ Yes — Mark "171" on ISS
- ☐ No — SKIP to Check Item R17

## b. During this 4-month period, did . . . receive any income because of . . . 's health condition or disability? (Other than Social Security, SSI, or VA?)

- 1388 ☐ Yes
- ☐ No
- x1 ☐ DK } SKIP to Check Item R17

## c. What kind of income?

Anything else?

Mark (X) all that apply.

- 1390 ☐ U.S. Government Railroad Retirement — Mark "2" on ISS
- 1392 ☐ Black Lung payments — Mark "9" on ISS
- 1394 ☐ Worker's Compensation — Mark "10" on ISS
- 1396 ☐ Payments from a sickness, accident or disability insurance policy purchased on your own — Mark "13" on ISS
- 1398 ☐ Pension from company or union — Mark "30" on ISS
- 1400 ☐ Federal Civil Service or other Federal civilian employee pension — Mark "31" on ISS
- 1402 ☐ U.S. Military retirement pay (exclude payments from the Veterans Administration) — Mark "32" on ISS
- 1406 ☐ State government pension — Mark "34" on ISS
- 1408 ☐ Local government pension — Mark "35" on ISS
- 1410 ☐ Other or DK — Specify and enter code from income source list. If income type not listed or "DK," enter code "38" — Mark ISS
- 1412 ☐

## CHECK ITEM R17

Refer to cc item 26a.

What is . . . 's marital status?

- 1414 ☐ Married — SKIP to 20
- ☐ Widowed — SKIP to 22a
- ☐ Divorced
- ☐ Separated
- ☐ Never married — SKIP to Check Item R18

## 19. Did . . . receive any alimony (or support payments other than child support) during the 4-month period?

- 1416 ☐ Yes — Mark "29" on ISS and SKIP to Check Item R18
- ☐ No
- x1 ☐ DK } SKIP to Check Item R18
- x2 ☐ Ref.

## 20. (People who have been widowed or divorced sometimes receive income because of their former marriage.) Has . . . ever been widowed or divorced?

- 1418 ☐ Widowed — SKIP to 22a
- ☐ Divorced
- ☐ Both widowed and divorced
- ☐ No — SKIP to Check Item R21

## CHECK ITEM R18

Refer to cc item 27.

Is . . . the designated parent or guardian of children under 18 who live in this household?

- 1420 ☐ Yes
- ☐ No — SKIP to Check Item R19

## 21. Did . . . receive any child support payments during this 4-month period? (Include "pass through" child support payments paid through the welfare office. Exclude all other child support payments from the welfare office.)

- 1422 ☐ Yes — Mark "28" on ISS
- ☐ No
- x1 ☐ DK
- x2 ☐ Ref.

# Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

<b>CHECK ITEM R19</b>	Is "Both widowed and divorced" (box 3) marked in item 20, page 7?	<b>1424</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to Check Item R21
<b>22a.</b>	During this 4-month period, did . . . receive any pensions or annuities as a widow(er) (other than Social Security)?	<b>1426</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No } SKIP to Check Item R21 x1 <input type="checkbox"/> DK }
<b>b.</b>	What kind of income was this? Was there anything else? (SHOW FLASHCARD K) Mark (X) all that apply.	<b>1428</b>	1 <input type="checkbox"/> U.S. Government Railroad Retirement — Mark "2" on ISS
		<b>1430</b>	2 <input type="checkbox"/> Veterans Compensation or pension — Mark "8" on ISS
		<b>1432</b>	3 <input type="checkbox"/> Black Lung payments — Mark "9" on ISS
		<b>1434</b>	4 <input type="checkbox"/> Pension from company or union — Mark "30" on ISS
		<b>1436</b>	5 <input type="checkbox"/> Federal Civil Service or other Federal civilian employee pension — Mark "31" on ISS
		<b>1438</b>	6 <input type="checkbox"/> U.S. Military retirement pay (exclude payments from the Veterans Administration) — Mark "32" on ISS
		<b>1440</b>	7 <input type="checkbox"/> National Guard or Reserve Forces retirement — Mark "33" on ISS
		<b>1442</b>	8 <input type="checkbox"/> State government pension — Mark "34" on ISS
		<b>1444</b>	9 <input type="checkbox"/> Local government pension — Mark "35" on ISS
		<b>1446</b>	10 <input type="checkbox"/> Income from paid-up life insurance policies or annuities — Mark "36" on ISS
		<b>1448</b>	11 <input type="checkbox"/> Payments from estate or trust — Mark "37" on ISS
		<b>1450</b>	12 <input type="checkbox"/> Other or DK — Specify and enter code from income source list. If income type not listed or "DK," enter code "38" — Mark ISS
		<b>1452</b>	<input type="checkbox"/> <input type="checkbox"/>
<b>CHECK ITEM R20</b>	Is "Veterans Compensation or pension" marked in item 22b?	<b>1454</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to Check Item R21
<b>22c.</b>	Did . . . 's late spouse die while in the service or from a service-related injury?	<b>1456</b>	1 <input type="checkbox"/> Yes, in the service 2 <input type="checkbox"/> Yes, from service-related injury 3 <input type="checkbox"/> No
<b>CHECK ITEM R21</b>	Is . . . 65 years of age or over?	<b>1458</b>	1 <input type="checkbox"/> Yes — SKIP to 23a 2 <input type="checkbox"/> No
<b>CHECK ITEM R22</b>	Refer to item 18a, page 7. Does . . . have a work disability?	<b>1460</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to Check Item R23
<b>23a.</b>	Medicare is a health insurance program for disabled persons and persons 65 or over. People covered by Medicare have a card that looks like this (SHOW FLASHCARD L). Was . . . covered by Medicare?	<b>1462</b>	1 <input type="checkbox"/> Yes — Mark "172" on ISS 2 <input type="checkbox"/> No } SKIP to Check Item R23 x1 <input type="checkbox"/> DK }
<b>b.</b>	May I see . . . 's Medicare card to record the claim number and type of coverage?	<b>1464</b>	<input type="checkbox"/> <input type="checkbox"/> - <input type="checkbox"/> - <b>1466</b> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> - <b>1467</b> <input type="checkbox"/> <input type="checkbox"/>
		<b>1468</b>	TYPE OF COVERAGE 1 <input type="checkbox"/> Hospital only (Type A) 2 <input type="checkbox"/> Medical only (Type B) 3 <input type="checkbox"/> Both hospital and medical (Types A and B) } SKIP to Check Item R23 4 <input type="checkbox"/> Card not available — ASK 23c
<b>c.</b>	If I were to call later would you be able to provide me with . . . 's Medicare number? (This information is especially important for the purposes of this survey.)	<b>1470</b>	1 <input type="checkbox"/> Yes — Mark Callback Summary and Reminder Card, Item 2 2 <input type="checkbox"/> No
<b>d.</b>	Medicare has an optional feature which costs extra and helps pay for doctor bills. Does . . . 's Medicare help pay for doctor bills?	<b>1472</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK
<b>CHECK ITEM R23</b>	Refer to cc item 27. Is . . . the designated parent or guardian of children under 18 who live in this household?	<b>1474</b>	1 <input type="checkbox"/> Yes — SKIP to Check Item R25 2 <input type="checkbox"/> No
<b>CHECK ITEM R24</b>	Is . . . 18 years of age or over?	<b>1476</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 27a
<b>CHECK ITEM R25</b>	Is ISS code "27" (Food stamps) listed in the Income Roster (item 11b, page 5)?	<b>1478</b>	1 <input type="checkbox"/> Yes — SKIP to Check Item R26 2 <input type="checkbox"/> No
<b>24.</b>	Was . . . authorized to receive food stamps at any time during the 4-month period? (An authorized person is one whose name appears on a certification card.)	<b>1480</b>	1 <input type="checkbox"/> Yes — Mark "27" on ISS 2 <input type="checkbox"/> No



# Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

<b>CHECK ITEM R26</b>	Interview status of . . . 's spouse.	<b>1482</b>	<input type="checkbox"/> No spouse in household <input type="checkbox"/> Interview for spouse not yet conducted <input type="checkbox"/> Interview for spouse already conducted — <i>SKIP to Check Item R27</i>
<b>25a.</b>	(Other than what we have already mentioned) during the 4-month period, did . . . receive any (other) welfare (such as AFDC, WIC, or General Assistance) (for . . . or . . . 's children)? (Exclude energy assistance.)	<b>1484</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No — <i>SKIP to Check Item R27</i>
<b>b.</b>	What kind of welfare did . . . receive? Anything else? Mark (X) all that apply.	<b>1486</b> <b>1488</b> <b>1490</b> <b>1492</b> <b>1494</b> <b>1496</b> <b>1498</b>	<input type="checkbox"/> AFDC — Mark "20" on ISS <input type="checkbox"/> General Assistance or General Relief — Mark "21" on ISS <input type="checkbox"/> Indian, Cuban or Refugee Assistance — Mark "22" on ISS <input type="checkbox"/> Foster Child Care — Mark "23" on ISS <input type="checkbox"/> WIC — Mark "25" on ISS <input type="checkbox"/> Other or DK — Specify and enter code from income source list. If income type not listed or "DK", enter code "24" — Mark ISS <div style="text-align: right;">↓</div>
<b>CHECK ITEM R27</b>	Is "Medicaid" (code 173) marked for . . . on cc item 47?	<b>1500</b>	<input type="checkbox"/> Yes — <i>SKIP to 26b</i> <input type="checkbox"/> No
<b>26a.</b>	(Refer to FLASHCARD M for Medicaid name.) During the 4-month period was . . . covered by (Use local name for Medicaid) or another public assistance program that pays for medical care?	<b>1502</b>	<input type="checkbox"/> Yes — Mark "173" on ISS <input type="checkbox"/> No
<b>b.</b>	(Refer to FLASHCARD M for Medicaid name.) According to our last visit . . . was covered by (Use local name for Medicaid). Was . . . covered by it at any time during the 4-month period?	<b>1504</b>	<input type="checkbox"/> Yes — Mark "173" on ISS <input type="checkbox"/> No
<b>CHECK ITEM R28</b>	Refer to cc item 27. Is . . . the designated parent or guardian of children under 18 who live in this household?	<b>1506</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No — <i>SKIP to Check Item R29</i>
<b>26c.</b>	Were any of . . . 's children (under 18) covered by (Use local name for Medicaid)?	<b>1508</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No — <i>SKIP to Check Item R29</i>
<b>d.</b>	Which children were covered?	<b>1510</b>	<input checked="" type="checkbox"/> All children OR <div style="display: flex; justify-content: space-between;"> <div>Person No.</div> <div>Name</div> </div>
		<b>1512</b>	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>
		<b>1514</b>	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>
		<b>1516</b>	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>
		<b>1518</b>	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>
		<b>1520</b>	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>
<b>CHECK ITEM R29</b>	Was . . . or any of . . . 's children (under 18) covered by Medicaid?	<b>1524</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No — <i>SKIP to 27a</i>
<b>26e.</b>	Was (. . ./(and) . . . 's children) covered during the entire 4-month period?	<b>1526</b>	<input type="checkbox"/> Yes — <i>SKIP to 27a</i> <input type="checkbox"/> No
<b>f.</b>	In which months was (. . ./(and) . . . 's children) covered? Mark (X) all that apply.	<b>1528</b> <b>1530</b> <b>1532</b> <b>1534</b>	<input type="checkbox"/> Last month <input type="checkbox"/> 2 months ago <input type="checkbox"/> 3 months ago <input type="checkbox"/> 4 months ago

NOTES

# Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

<b>27a.</b> During the 4-month period, did . . . have group or individual health insurance in . . . 's own name? (Exclude Medicaid, Medicare, CHAMPUS, CHAMPVA and plans paying benefits only for accidents or specific diseases.)	<b>1536</b> 1 <input type="checkbox"/> Yes — SKIP to 27c 2 <input type="checkbox"/> No														
<b>ASK OR VERIFY —</b> <b>b.</b> Was . . . covered by a health insurance plan in somebody else's name?	<b>1537</b> 1 <input type="checkbox"/> Yes } SKIP to Check Item R30 2 <input type="checkbox"/> No }														
<b>c.</b> Did . . . have a plan in . . . 's own name during the entire 4-month period?	<b>1538</b> 1 <input type="checkbox"/> Yes — SKIP to 27e 2 <input type="checkbox"/> No														
<b>d.</b> In which months did . . . have a plan? Mark (X) all that apply.	<b>1540</b> 1 <input type="checkbox"/> Last month <b>1542</b> 2 <input type="checkbox"/> 2 months ago <b>1544</b> 3 <input type="checkbox"/> 3 months ago <b>1546</b> 4 <input type="checkbox"/> 4 months ago														
<b>e.</b> Was . . . 's plan provided through an employer or union (or through a former employer or a pension plan)?	<b>1548</b> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 27g														
<b>f.</b> Did the employer or union (former employer or pension plan) pay for all, part, or none of the cost of this plan?	<b>1550</b> 1 <input type="checkbox"/> All 2 <input type="checkbox"/> Part 3 <input type="checkbox"/> None														
<b>g.</b> Was this an individual plan or a family plan?	<b>1552</b> 1 <input type="checkbox"/> Individual — SKIP to Check Item R30 2 <input type="checkbox"/> Family														
<b>h.</b> Did . . . 's health plan cover all the persons living here?	<b>1554</b> 1 <input type="checkbox"/> Yes — SKIP to Check Item R32 2 <input type="checkbox"/> No														
<b>i.</b> Other than . . . , which persons in this household were covered by . . . 's plan?	<table border="1"> <thead> <tr> <th>Person No.</th> <th>Name</th> </tr> </thead> <tbody> <tr> <td><b>1556</b> <input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td><b>1558</b> <input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td><b>1560</b> <input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td><b>1562</b> <input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td><b>1564</b> <input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td><b>1566</b> x3 <input type="checkbox"/> None</td> <td></td> </tr> </tbody> </table>	Person No.	Name	<b>1556</b> <input type="text"/>	<input type="text"/>	<b>1558</b> <input type="text"/>	<input type="text"/>	<b>1560</b> <input type="text"/>	<input type="text"/>	<b>1562</b> <input type="text"/>	<input type="text"/>	<b>1564</b> <input type="text"/>	<input type="text"/>	<b>1566</b> x3 <input type="checkbox"/> None	
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<b>1556</b> <input type="text"/>	<input type="text"/>														
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<b>1560</b> <input type="text"/>	<input type="text"/>														
<b>1562</b> <input type="text"/>	<input type="text"/>														
<b>1564</b> <input type="text"/>	<input type="text"/>														
<b>1566</b> x3 <input type="checkbox"/> None															
<b>CHECK ITEM R30</b> Refer to cc item 27. Is . . . the designated parent or guardian of children under 18 who live in this household?	<b>1568</b> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to Check Item R32														
<b>CHECK ITEM R31</b> Have each of these children already been identified as members of a family health insurance plan?	<b>1570</b> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 27k														
<b>27j.</b> I have recorded that all of . . . 's children were covered by a health insurance plan — is that correct?	<b>1572</b> 1 <input type="checkbox"/> Yes — SKIP to Check Item R32 2 <input type="checkbox"/> No														
<b>k.</b> Were any of (Which of) . . . 's children (were) covered by a health insurance plan? (Exclude Medicaid, Medicare, CHAMPUS, CHAMPVA and plans paying benefits only for accidents or specific diseases.)	<b>1574</b> x5 <input type="checkbox"/> All children OR <table border="1"> <thead> <tr> <th>Person No.</th> <th>Name</th> </tr> </thead> <tbody> <tr> <td><b>1576</b> <input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td><b>1578</b> <input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td><b>1580</b> <input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td><b>1582</b> <input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td><b>1584</b> <input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td><b>1586</b> x3 <input type="checkbox"/> None</td> <td></td> </tr> </tbody> </table>	Person No.	Name	<b>1576</b> <input type="text"/>	<input type="text"/>	<b>1578</b> <input type="text"/>	<input type="text"/>	<b>1580</b> <input type="text"/>	<input type="text"/>	<b>1582</b> <input type="text"/>	<input type="text"/>	<b>1584</b> <input type="text"/>	<input type="text"/>	<b>1586</b> x3 <input type="checkbox"/> None	
Person No.	Name														
<b>1576</b> <input type="text"/>	<input type="text"/>														
<b>1578</b> <input type="text"/>	<input type="text"/>														
<b>1580</b> <input type="text"/>	<input type="text"/>														
<b>1582</b> <input type="text"/>	<input type="text"/>														
<b>1584</b> <input type="text"/>	<input type="text"/>														
<b>1586</b> x3 <input type="checkbox"/> None															
<b>CHECK ITEM R32</b> Are any assets listed in the Asset Roster (Item 28b)?	<b>1588</b> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 29a														

# Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

**28a.** According to the information we obtained last time, . . . had (Read asset types in 28b, column (2)) during (8 months ago) through (5 months ago) . Was this information recorded correctly?

1589

1 ☐ Yes

2 ☐ No — Resolve problems and make appropriate entries in 28b, column (5)

ASK  
28c

## b. ASSET ROSTER (ISS CODES 100 — 150, 174)

Line No. (1)	Asset type (2)	Asset code (3)	This reference period (4)	Previous reference period (5)	
				Should not have been listed	Was not listed; should have been
1		1590 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1592 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No	1593 1 <input type="checkbox"/>	2 <input type="checkbox"/>
2		1594 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1596 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No	1597 1 <input type="checkbox"/>	2 <input type="checkbox"/>
3		1598 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1600 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No	1601 1 <input type="checkbox"/>	2 <input type="checkbox"/>
4		1602 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1604 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No	1605 1 <input type="checkbox"/>	2 <input type="checkbox"/>
5		1606 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1608 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No	1609 1 <input type="checkbox"/>	2 <input type="checkbox"/>
6		1610 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1612 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No	1613 1 <input type="checkbox"/>	2 <input type="checkbox"/>
7		1614 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1616 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No	1617 1 <input type="checkbox"/>	2 <input type="checkbox"/>
8		1618 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1620 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No	1621 1 <input type="checkbox"/>	2 <input type="checkbox"/>

**C.** At any time during the past 4 months, that is \_\_\_\_\_, \_\_\_\_\_, and \_\_\_\_\_, did . . . still own (have) (Read assets in 28b, column (2))?

MARK (X) APPROPRIATE BOX IN ITEM 28b, COLUMN (4) FOR EACH ASSET TYPE LISTED.

**29a.** (In addition to the assets we have already mentioned) at any time during the 4-month period did . . . have any (other) kinds of assets which earn interest or bring in money, such as the ones shown on this card? (SHOW FLASHCARD N.)

1622

1 ☐ Yes

2 ☐ No

x1 ☐ DK

x2 ☐ Ref.

SKIP to 30a

**b.** Which kinds of these assets did . . . own?  
Any others?  
(Exclude IRA and Keogh accounts)

1626

1 ☐ Regular or passbook savings accounts — Mark "100" on ISS

1628

2 ☐ Money market deposit accounts — Mark "101" on ISS

1630

3 ☐ Certificates of deposit or other savings certificates — Mark "102" on ISS

1632

4 ☐ Interest-earning checking accounts (such as NOW or Super-NOW accounts) — Mark "103" on ISS

1636

5 ☐ Money market funds — Mark "104" on ISS

1638

6 ☐ U. S. Government securities — Mark "105" on ISS

1640

7 ☐ Municipal or corporate bonds — Mark "106" on ISS

1642

8 ☐ Mortgages — Mark "130" on ISS

1644

9 ☐ U. S. Savings Bonds (E, EE) — Mark "174" on ISS

1646

10 ☐ Other interest-earning assets — Mark "107" on ISS and specify

1648

11 ☐ Stocks or mutual fund shares — Mark "110" on ISS

1650

12 ☐ Rental property — Mark "120" on ISS

1652

13 ☐ Royalties — Mark "140" on ISS

1654

14 ☐ Other financial investments — Mark "150" on ISS and specify

NOTES

## Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

<b>30a. Was . . . enrolled in school, either full-time or part-time during any of the past 4 months? (Include any regular school, such as elementary, high school, or college, or any vocational, technical, or business school.)</b>	1656	<input type="checkbox"/> Yes, full-time <input type="checkbox"/> Yes, part-time <input type="checkbox"/> No — SKIP to Check Item R33
<b>b. During which months was . . . enrolled?</b> <i>Mark (X) all that apply.</i>	1658 1660 1662 1664 1666	<input type="checkbox"/> All months <input type="checkbox"/> Last month <input type="checkbox"/> 2 months ago <input type="checkbox"/> 3 months ago <input type="checkbox"/> 4 months ago
<b>c. At what level or grade was . . . enrolled?</b> <i>(If enrolled at more than one level during this period, check most recent level.)</i>	1668	<input type="checkbox"/> Elementary grades 1—8 <input type="checkbox"/> High school grades 9—12 <input type="checkbox"/> College year 1 <input type="checkbox"/> College year 2 <input type="checkbox"/> College year 3 <input type="checkbox"/> College year 4 <input type="checkbox"/> College year 5 <input type="checkbox"/> College year 6 <input type="checkbox"/> Vocational school <input type="checkbox"/> Technical school <input type="checkbox"/> Business school
<b>31a. Were any of . . . 's educational expenses during the last 4 months paid for by the GI Bill, a PELL (BEOG) Grant, a guaranteed or National Direct Student Loan, any type of scholarship, grant, or other educational assistance?</b>	1670	<input type="checkbox"/> Yes <input type="checkbox"/> No — SKIP to Check Item R33
<b>b. What kind of educational assistance did . . . receive? Anything else?</b> <i>Mark (X) all that apply.</i>	1672 1674  1676 1678 1680  1682 1684 1686 1688 1690 1692	<input type="checkbox"/> GI Bill — Mark "40" on ISS <input type="checkbox"/> Other Veteran's Administration Educational Assistance Programs (Survivors and Dependents; Vocational Rehabilitation; Post-Vietnam Veterans) — Mark "41" on ISS <input type="checkbox"/> College Work Study — Mark "175" on ISS <input type="checkbox"/> PELL Grant — Mark "176" on ISS <input type="checkbox"/> Supplemental Educational Opportunity Grant (SEOG) — Mark "177" on ISS <input type="checkbox"/> National Direct Student Loan (NDSL) — Mark "178" on ISS <input type="checkbox"/> Guaranteed Student Loan — Mark "179" on ISS <input type="checkbox"/> JTPA Training — Mark "180" on ISS <input type="checkbox"/> Employer Assistance — Mark "181" on ISS <input type="checkbox"/> Fellowship/Scholarship — Mark "182" on ISS <input type="checkbox"/> Other financial aid — Mark "183" on ISS
<b>CHECK ITEM R33</b>	1694	<input type="checkbox"/> Yes <input type="checkbox"/> No — SKIP to Check Item R34
<b>ASK OR VERIFY —</b> <b>32. Is . . . 's spouse in the Armed Forces?</b>	1696	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>CHECK ITEM R34</b>	1698	<input type="checkbox"/> Yes <input type="checkbox"/> No — SKIP to 34a
<b>33a. You said that during the 4-month period . . . received income from — (Read all items coded 1—56, 100—150, 170, and 175—183 that are marked on the ISS.) Is that correct?</b>	1700	<input type="checkbox"/> Yes <input type="checkbox"/> No — Probe and resolve (Make corrections to ISS if necessary)
<b>b. Did . . . receive income from any other source such as financial help from someone outside the household, payments from the government or anything else?</b>	1702	<input type="checkbox"/> Yes — SKIP to 34b <input type="checkbox"/> No — SKIP to Check Item E1
<b>34a. I have not recorded any sources of income for . . . during the 4-month period. Did . . . receive income from some source we have not covered, such as financial help from someone outside the household, payments from the government or anything else?</b>	1704	<input type="checkbox"/> Yes <input type="checkbox"/> No — SKIP to Check Item P1, page 45
<b>b. What kind of income did . . . receive? Anything else?</b>	1706 1708 1710	Enter codes from income source list and mark ISS. <div style="border: 1px solid black; width: 100px; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100px; height: 20px;"></div>

Section 2 – EARNINGS AND EMPLOYMENT

<b>CHECK ITEM E1</b>	Is "Worked" (code 170) marked on ISS?	<b>1712</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to first ISS Code or Check Item P1, page 45
<b>1 a.</b>	You said . . . worked during the 4-month period. Was . . . working for an employer or was . . . self-employed? (Include unpaid worker in family business or farm as working for an employer.)	<b>1714</b>	1 <input type="checkbox"/> Worked for employer only 2 <input type="checkbox"/> Self-employed only — SKIP to Statement B, page 18 3 <input type="checkbox"/> Both worked for employer and self-employed
<b>b.</b>	How many different employers did . . . work for during this 4-month period?	<b>1716</b>	1 <input type="checkbox"/> 1 employer 2 <input type="checkbox"/> 2 employers 3 <input type="checkbox"/> 3 or more employers
<b>CHECK ITEM E2</b>	Is "Both worked for employer and self- employed" (box 3) marked in 1a?	<b>1718</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 2a
<b>STATEMENT A</b> . . . worked for an employer and was also self-employed. The first questions will be about . . . 's work for an employer.			
NOTES			

## Section 2 — EARNINGS AND EMPLOYMENT (Continued)

### Part A1 — EMPLOYER IDENTIFICATION NUMBER 1

**2a. What is the name of the employer for whom . . . worked during this 4-month period?**

(If . . . worked for 2 employers, enter one employer here and the other in part A2, page 16. If . . . worked for 3 or more employers, enter in A1 and A2 the 2 employers for whom . . . worked the most hours.)

PGM 8  
2000

Employer name

**CHECK  
ITEM E3**

Enter employer ID number from cc item 42, or if a new employer, enter next available ID number.

PGM 8  
2002

Employer I.D. No.

**2b. What kind of business or industry was**  
(Name of company or business)?

For example: TV and radio manufacturing, retail shoe store, State Labor Department, farm.

PGM 8  
2004

**c. ASK OR VERIFY —**

Is it mainly —

PGM 8  
2006

- 1 ☐ **Manufacturing?**  
2 ☐ **Wholesale Trade?**  
3 ☐ **Retail Trade?**  
4 ☐ **Some other kind of business?**

**d. What kind of work was . . . doing on this job?**

For example: Electrical engineer, stock clerk, typist, farmer

PGM 8  
2008

**e. What were . . . 's main activities or duties?**

For example: Types, keeps account books, files, sells cars, operates printing press, finishes concrete.

PGM 8  
2010

**f. ASK OR VERIFY —**

Was . . . an employee of —

PGM 8  
2012

- 1 ☐ **A private company or individual?**  
2 ☐ **Federal government (exclude Armed Forces)?**  
3 ☐ **State government?**  
4 ☐ **Local government?**  
5 ☐ **Armed Forces?**  
6 ☐ **Unpaid in family business or farm? —**  
SKIP to Check Item E5

**3a. ASK OR VERIFY —**

Was . . . employed by (Name of employer) during the entire 4-month period?

PGM 7  
2014

- 1 ☐ Yes — SKIP to 4  
2 ☐ No

**b. When was . . . employed by (Name of employer) during this 4-month period?**

2016

FROM

Month 2018 Day

2020

TO

Month 2022 Day

**4. ASK OR VERIFY —**

How many hours per week did . . . usually work at this job?

2024

Hours

- x3 ☐ None  
x1 ☐ DK

**5. Was . . . paid by the hour on this job?**

2026

- 1 ☐ Yes  
2 ☐ No — SKIP to 7

**6. What was . . . 's regular hourly pay rate at the end of** (Read last month or "to" date in item 3b)?

2028

\$ .

- x1 ☐ DK  
x2 ☐ Ref. — SKIP to Check Item E5

**7. During the 4-month period how often was . . . paid on this job?**

2030

- 1 ☐ Once a week  
2 ☐ Once each 2 weeks  
3 ☐ Once a month  
4 ☐ Twice a month  
5 ☐ Some other way — Specify ↓

## Section 2 — EARNINGS AND EMPLOYMENT (Continued)

### Part A1 — EMPLOYER IDENTIFICATION NUMBER 1(Continued)

#### 8a. READ STATEMENT ONLY ONCE PER RESPONDENT

The next question is about the pay . . . received from this job during the 4-month period. We need the most accurate figures you can provide. Be sure to include any tips, bonuses, overtime pay, or commissions.

What was the total amount of pay that . . . received BEFORE deductions on this job in (Read each month)?

FOR MEMBERS OF THE ARMED FORCES —  
(Be sure to include housing allowances and any other special types of pay.)

NOTE: Certain months contain 5 paydays for workers paid weekly and 3 paydays for workers paid every 2 weeks.



LAST MONTH

2032

\$

00

x3 ☐ None

x1 ☐ DK

x2 ☐ Ref.

INTERVIEWER  
USE ONLY

\$ .00

\$ .00

\$ .00

\$ .00

\$ .00

Total \$ .00

2 MONTHS AGO

2034

\$

00

x3 ☐ None

x1 ☐ DK

x2 ☐ Ref.

\$ .00

\$ .00

\$ .00

\$ .00

\$ .00

Total \$ .00

3 MONTHS AGO

2036

\$

00

x3 ☐ None

x1 ☐ DK

x2 ☐ Ref.

\$ .00

\$ .00

\$ .00

\$ .00

\$ .00

Total \$ .00

4 MONTHS AGO

2038

\$

00

x3 ☐ None

x1 ☐ DK

x2 ☐ Ref.

\$ .00

\$ .00

\$ .00

\$ .00

\$ .00

Total \$ .00

CHECK  
ITEM E4

Is "DK" marked in all parts of item 8a?

2040

1 ☐ Yes

2 ☐ No — SKIP to 9a

8b. If we were to call back later would you (or . . .) be able to provide us with the amounts of pay . . . received in each of these months? (Information about how much . . . received each month is very important to the results of our survey.)

2042

1 ☐ Yes — Mark Callback Summary and Reminder Card, Item 3a

2 ☐ No

9a. On this job, is (was) . . . a member of a labor union or of an employee association similar to a union?

2044

1 ☐ Yes — SKIP to Check Item E5

2 ☐ No

b. Is (was) . . . covered by a union or employee association contract?

2046

1 ☐ Yes

2 ☐ No

CHECK  
ITEM E5

Number of employers in item 1b, page 13?

2048

1 ☐ 1 employer — SKIP to Check Item E8, page 17

2 ☐ 2 or more employers

## Section 2 — EARNINGS AND EMPLOYMENT (Continued)

### Part A2 — EMPLOYER IDENTIFICATION NUMBER 2

<b>10a. What is the name of the other employer for whom . . . worked during this 4-month period?</b> <i>(If . . . worked for 3 or more employers, enter in A1 and A2 the 2 employers for whom . . . worked the most hours.)</i>	<b>PGM 8</b> <b>2100</b>	Employer Name <hr/>
<b>CHECK ITEM E6</b> Enter employer ID number from cc item 42, or if a new employer, enter next available ID number. <span style="float: right;">→</span>	<b>PGM 8</b> <b>2102</b>	Employer I.D. No. <div style="border: 1px solid black; width: 30px; height: 20px; margin: 5px auto;"></div>
<b>10b. What kind of business or industry was (Name of company or business)?</b>  <b>For example: TV and radio manufacturing, retail shoe store, State Labor Department, farm.</b>	<b>PGM 8</b> <b>2104</b>	<hr/> <hr/>
<b>c. ASK OR VERIFY —</b> <b>Is it mainly —</b>	<b>PGM 8</b> <b>2106</b>	1 <input type="checkbox"/> <b>Manufacturing?</b> 2 <input type="checkbox"/> <b>Wholesale Trade?</b> 3 <input type="checkbox"/> <b>Retail Trade?</b> 4 <input type="checkbox"/> <b>Some other kind of business?</b>
<b>d. What kind of work was . . . doing on this job?</b> <b>For example: Electrical engineer, stock clerk, typist, farmer</b>	<b>PGM 8</b> <b>2108</b>	<hr/>
<b>e. What were . . . 's main activities or duties?</b> <b>For example: Types, keeps account books, files, sells cars, operates printing press, finishes concrete.</b>	<b>PGM 8</b> <b>2110</b>	<hr/> <hr/>
<b>f. ASK OR VERIFY —</b> <b>Was . . . an employee of —</b>	<b>PGM 8</b> <b>2112</b>	1 <input type="checkbox"/> <b>A private company or individual?</b> 2 <input type="checkbox"/> <b>Federal government (exclude Armed Forces)?</b> 3 <input type="checkbox"/> <b>State government?</b> 4 <input type="checkbox"/> <b>Local government?</b> 5 <input type="checkbox"/> <b>Armed Forces?</b> 6 <input type="checkbox"/> <b>Unpaid in family business or farm? —</b> <i>SKIP to Check Item E8</i>
<b>11a. ASK OR VERIFY —</b> <b>Was . . . employed by (Name of employer) during the entire 4-month period?</b>	<b>PGM 7</b> <b>2114</b>	1 <input type="checkbox"/> <b>Yes — SKIP to 12</b> 2 <input type="checkbox"/> <b>No</b>
<b>b. When was . . . employed by (Name of employer) during this 4-month period?</b>	<b>2116</b>	FROM <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 30px; height: 20px; margin-right: 5px;"></div> <div style="margin-right: 5px;">Month</div> <div style="border: 1px solid black; width: 30px; height: 20px; margin-right: 5px;"></div> <div style="margin-right: 5px;">Day</div> </div> TO <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 30px; height: 20px; margin-right: 5px;"></div> <div style="margin-right: 5px;">Month</div> <div style="border: 1px solid black; width: 30px; height: 20px; margin-right: 5px;"></div> <div style="margin-right: 5px;">Day</div> </div>
<b>12. ASK OR VERIFY —</b> <b>How many hours per week did . . . usually work at this job?</b>	<b>2124</b>	<div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 30px; height: 20px; margin-right: 5px;"></div> <div style="margin-right: 5px;">Hours</div> </div> x3 <input type="checkbox"/> <b>None</b> x1 <input type="checkbox"/> <b>DK</b>
<b>13. Was . . . paid by the hour on this job?</b>	<b>2126</b>	1 <input type="checkbox"/> <b>Yes</b> 2 <input type="checkbox"/> <b>No — SKIP to 15</b>
<b>14. What was . . . 's regular hourly pay rate at the end of (Read last month or "to" date in item 11b)?</b>	<b>2128</b>	<div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 80px; height: 20px; margin-right: 5px;"></div> <div style="margin-right: 5px;">\$</div> <div style="border: 1px solid black; width: 30px; height: 20px; margin-right: 5px;"></div> <div style="margin-right: 5px;">.</div> <div style="border: 1px solid black; width: 30px; height: 20px;"></div> </div> x1 <input type="checkbox"/> <b>DK</b> x2 <input type="checkbox"/> <b>Ref. — SKIP to Check Item E8</b>
<b>15. During the 4-month period how often was . . . paid on this job?</b>	<b>2130</b>	1 <input type="checkbox"/> <b>Once a week</b> 2 <input type="checkbox"/> <b>Once each 2 weeks</b> 3 <input type="checkbox"/> <b>Once a month</b> 4 <input type="checkbox"/> <b>Twice a month</b> 5 <input type="checkbox"/> <b>Some other way — Specify</b> <span style="float: right;">↓</span> <hr style="width: 100%;"/>



## Section 2 — EARNINGS AND EMPLOYMENT (Continued)

## Part A2 — EMPLOYER IDENTIFICATION NUMBER 2(Continued)

## 16a. READ STATEMENT ONLY ONCE PER RESPONDENT

The next question is about the pay . . . received from this job during the 4-month period. We need the most accurate figures you can provide. Be sure to include any tips, bonuses, overtime pay, or commissions.

What was the total amount of pay that . . . received BEFORE deductions on this job in (Read each month)?

FOR MEMBERS OF THE ARMED FORCES — (Be sure to include housing allowances and any other special types of pay.)

NOTE: Certain months contain 5 paydays for workers paid weekly and 3 paydays for workers paid every 2 weeks.



LAST MONTH

2132 \$ . 00

x3 ☐ Nonex1 ☐ DKx2 ☐ Ref.INTERVIEWER  
USE ONLY

\$ .00

\$ .00

\$ .00

\$ .00

\$ .00

Total \$ .00

2 MONTHS AGO

2134 \$ . 00

x3 ☐ Nonex1 ☐ DKx2 ☐ Ref.

\$ .00

\$ .00

\$ .00

\$ .00

\$ .00

Total \$ .00

3 MONTHS AGO

2136 \$ . 00

x3 ☐ Nonex1 ☐ DKx2 ☐ Ref.

\$ .00

\$ .00

\$ .00

\$ .00

\$ .00

Total \$ .00

4 MONTHS AGO

2138 \$ . 00

x3 ☐ Nonex1 ☐ DKx2 ☐ Ref.

\$ .00

\$ .00

\$ .00

\$ .00

\$ .00

Total \$ .00

CHECK  
ITEM E7

Is "DK" marked in all parts of item 16a?

2140 1 ☐ Yes  
2 ☐ No — SKIP to 17a

16b. If we were to call back later would you (or . . .) be able to provide us with the amounts of pay . . . received in each of these months? (Information about how much . . . received each month is very important to the results of our survey.)

2142 1 ☐ Yes — Mark Callback Summary and Reminder Card, Item 3b  
2 ☐ No

17a. On this job, is (was) . . . a member of a labor union or of an employee association similar to a union?

2144 1 ☐ Yes — SKIP to Check Item E8  
2 ☐ No

b. Is (was) . . . covered by a union or employee association contract?

2146 1 ☐ Yes  
2 ☐ NoCHECK  
ITEM E8

Is "Both worked for employer and self-employed" (box 3) marked in item 1a, page 13?

2148 1 ☐ Yes — Read Statement B  
2 ☐ No — SKIP to first ISS Code or Check Item P1, page 45

**Section 2 — EARNINGS AND EMPLOYMENT (Continued)****Part B1 — SELF-EMPLOYMENT IDENTIFICATION NUMBER 1****STATEMENT B**

You said . . . was (also) self-employed during this 4-month period.

**1a. What was the name of . . . 's business/professional practice/farm?***(If . . . was self-employed in 2 businesses, enter one business here and the other in part B2, page 21. If . . . was self-employed in 3 or more businesses, enter in B1 and B2 the 2 businesses producing the highest gross earnings.)*PGM 8  
2200

Business name

**CHECK  
ITEM S1**

Enter business ID number from cc item 43, or if a new business, enter the next available ID number. →

PGM 8  
2202

Business I.D. No.

**1b. What kind of business was this?**PGM 8  
2204

ASK OR VERIFY —

**c. Is it mainly —**PGM 8  
2206

- 1 ☐ **Manufacturing?**  
2 ☐ **Wholesale Trade?**  
3 ☐ **Retail Trade?**  
4 ☐ **Some other kind of business?**

**d. What kind of work was . . . doing?**PGM 8  
2208**e. What were . . . 's most important activities or duties?**PGM 8  
2210

ASK OR VERIFY —

**f. How many hours per week did . . . usually work at this business?**PGM 7  
2212  Hours

- x3 ☐ None  
x1 ☐ DK

**2. Do you think that the gross earnings of this business will be \$1,000 or more during the next 12 months?***Gross earnings include sales and receipts before expenses.*

2214

- 1 ☐ Yes  
2 ☐ No — *SKIP to 10*  
x1 ☐ DK

**CHECK  
ITEM S2**

Have questions 3—5b already been answered for this business by another household member?

2216

- 1 ☐ Yes — *SKIP to 6a*  
2 ☐ No

**3. What was the total number of employees working for this business? Be sure to include . . .***Enter 999 if more than 1,000 employees.*

2218

   Employeesx1 ☐ DK**4a. Was . . . 's business incorporated?**

2220

- 1 ☐ Yes — *SKIP to 5a*  
2 ☐ No

**b. Was . . . 's business a sole proprietorship or a partnership?**

2222

- 1 ☐ Sole proprietorship — *SKIP to 6a*  
2 ☐ Partnership

**5a. Aside from . . . were any other members of this household owners or partners in this business?**

2224

- 1 ☐ Yes  
2 ☐ No — *SKIP to 6a*

**b. Which members?**

2226

Person No.

Name

2228

2230

**6a. Was . . . paid a regular salary from this business during the 4-month period?**

2232

- 1 ☐ Yes  
2 ☐ No

**b. Did . . . receive any (other) income from the business during this 4-month period?**

2234

- 1 ☐ Yes  
2 ☐ No

**CHECK  
ITEM S3**

Is "Yes" marked in either item 6a or 6b?

2236

- 1 ☐ Yes  
2 ☐ No — *SKIP to Check Item S5*

## Section 2 — EARNINGS AND EMPLOYMENT (Continued)

### Part B1 — SELF-EMPLOYMENT IDENTIFICATION NUMBER 1 (Continued)

#### 7. READ STATEMENT ONLY ONCE PER RESPONDENT.

The next question is about the income . . . received from this business during the 4-month period. We need the most accurate figures you can provide.

What was the total amount of income that . . . received from this business in (Read each month)?



LAST MONTH

2238

\$  .  00

- x3 ☐ None  
x1 ☐ DK  
x2 ☐ Ref.

INTERVIEWER  
USE ONLY

\$ .00

\$ .00

\$ .00

\$ .00

TOTAL \$ .00

2 MONTHS AGO

2240

\$  .  00

- x3 ☐ None  
x1 ☐ DK  
x2 ☐ Ref.

\$ .00

\$ .00

\$ .00

\$ .00

TOTAL \$ .00

3 MONTHS AGO

2242

\$  .  00

- x3 ☐ None  
x1 ☐ DK  
x2 ☐ Ref.

\$ .00

\$ .00

\$ .00

\$ .00

TOTAL \$ .00

4 MONTHS AGO

2244

\$  .  00

- x3 ☐ None  
x1 ☐ DK  
x2 ☐ Ref.

\$ .00

\$ .00

\$ .00

\$ .00

TOTAL \$ .00

CHECK  
ITEM S4

Is "DK" marked in all parts of item 7?

2246

- 1 ☐ Yes  
2 ☐ No — SKIP to Check Item S5

8. If we were to call back later would you (or . . .) be able to provide us with the amounts of income . . . received in each of these months? (Information about how much . . . received each month is very important to the results of our survey.)

2248

- 1 ☐ Yes — Mark Callback Summary and Reminder Card, Item 4a  
2 ☐ No

CHECK  
ITEM S5

Refer to item 4a, page 18.  
Is this business incorporated?

2250

- 1 ☐ Yes — SKIP to 11  
2 ☐ No

CHECK  
ITEM S6

Has information about the net profit (or loss) for this business already been obtained by another household member?

2252

- 1 ☐ Yes — SKIP to 11  
2 ☐ No

9a. Can you give me an estimate of the net profit or loss, that is, the difference between gross receipts and expenses, for this business during the 4-month period?

2254

- 1 ☐ Yes  
2 ☐ No — SKIP to 11

b. What was the net profit or loss?

2256

\$  .  00

2258

- x4 ☐ Loss in amount box —  
If "Broke even," mark \$1 in box.

} SKIP to 11

10. About how much did . . . earn from this business after expenses during the 4-month period?

2260

\$  .  00

- x3 ☐ None  
x1 ☐ DK  
x2 ☐ Ref.

11. Was . . . self-employed in any other business (professional practice/farm) during the 4-month period?

2262

- 1 ☐ Yes  
2 ☐ No — SKIP to first ISS Code or  
Check Item P1, page 45

## Section 2 — EARNINGS AND EMPLOYMENT (Continued)

### Part B2 — SELF-EMPLOYMENT IDENTIFICATION NUMBER 2

<b>12a. What was the name of . . . 's other business/ professional practice/farm?</b> <i>(If . . . was self-employed in 3 or more businesses, enter in B1 and B2 the 2 businesses producing the highest gross earnings.)</i>	<b>PGM 8</b> <b>2300</b>	Business name <hr/>								
<b>CHECK ITEM S7</b> Enter Business ID number from cc item 43, or if a new business, enter the next available ID number. <span style="border-bottom: 1px solid black; display: inline-block; width: 100px;"></span>	<b>PGM 8</b> <b>2302</b>	Business I.D. No. <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div>								
<b>12b. What kind of business was this?</b>	<b>PGM 8</b> <b>2304</b>	<hr/>								
ASK OR VERIFY — <b>c. Is it mainly —</b>	<b>PGM 8</b> <b>2306</b>	1 <input type="checkbox"/> <b>Manufacturing?</b> 2 <input type="checkbox"/> <b>Wholesale Trade?</b> 3 <input type="checkbox"/> <b>Retail Trade?</b> 4 <input type="checkbox"/> <b>Some other kind of business?</b>								
<b>d. What kind of work was . . . doing?</b>	<b>PGM 8</b> <b>2308</b>	<hr/>								
<b>e. What were . . . 's most important activities or duties?</b>	<b>PGM 8</b> <b>2310</b>	<hr/> <hr/>								
<b>f. How many hours per week did . . . usually work at this business?</b>	<b>PGM 7</b> <b>2312</b>	<div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> Hours x3 <input type="checkbox"/> None x1 <input type="checkbox"/> DK								
<b>13. Do you think that the gross earnings of this business will be \$1,000 or more during the next 12 months?</b> <i>Gross earnings include sales and receipts before expenses.</i>	<b>2314</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — <i>SKIP to 21</i> x1 <input type="checkbox"/> DK								
<b>CHECK ITEM S8</b> Have questions 14 — 16b already been answered for this business by another household member?	<b>2316</b>	1 <input type="checkbox"/> Yes — <i>SKIP to 17a</i> 2 <input type="checkbox"/> No								
<b>14. What was the total number of employees working for this business? Be sure to include . . .</b> <i>Enter 999 if more than 1,000 employees.</i>	<b>2318</b>	<div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> Employees x1 <input type="checkbox"/> DK								
<b>15a. Was . . . 's business incorporated?</b>	<b>2320</b>	1 <input type="checkbox"/> Yes — <i>SKIP to 16a</i> 2 <input type="checkbox"/> No								
<b>b. Was . . . 's business a sole proprietorship or a partnership?</b>	<b>2322</b>	1 <input type="checkbox"/> Sole proprietorship — <i>SKIP to 17a</i> 2 <input type="checkbox"/> Partnership								
<b>16a. Aside from . . . were any other members of this household owners or partners in this business?</b>	<b>2324</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — <i>SKIP to 17a</i>								
<b>b. Which members?</b>	<b>2326</b>  <b>2328</b>  <b>2330</b>	<table border="0"> <thead> <tr> <th style="text-align: left;">Person No.</th> <th style="text-align: left;">Name</th> </tr> </thead> <tbody> <tr> <td><div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div></td> <td><hr/></td> </tr> <tr> <td><div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div></td> <td><hr/></td> </tr> <tr> <td><div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div></td> <td><hr/></td> </tr> </tbody> </table>	Person No.	Name	<div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div>	<hr/>	<div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div>	<hr/>	<div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div>	<hr/>
Person No.	Name									
<div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div>	<hr/>									
<div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div>	<hr/>									
<div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div>	<hr/>									
<b>17a. Was . . . paid a regular salary from this business during the 4-month period?</b>	<b>2332</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No								
<b>b. Did . . . receive any (other) income from the business during this 4-month period?</b>	<b>2334</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No								
<b>CHECK ITEM S9</b> Is "Yes" marked in either item 17a or 17b?	<b>2336</b>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — <i>SKIP to Check Item S11</i>								

## Section 2 — EARNINGS AND EMPLOYMENT (Continued)

### Part B2 — SELF-EMPLOYMENT IDENTIFICATION NUMBER 2 (Continued)

#### 18. READ STATEMENT ONLY ONCE PER RESPONDENT.

The next question is about the income . . . received from this business during the 4-month period. We need the most accurate figures you can provide.

What was the total amount of income that . . . received from this business in (Read each month)?



LAST MONTH

2338

\$  .  00

X3 ☐ None  
X1 ☐ DK  
X2 ☐ Ref.

INTERVIEWER  
USE ONLY

\$ .00

\$ .00

\$ .00

\$ .00

TOTAL \$ .00

2 MONTHS AGO

2340

\$  .  00

X3 ☐ None  
X1 ☐ DK  
X2 ☐ Ref.

\$ .00

\$ .00

\$ .00

\$ .00

TOTAL \$ .00

3 MONTHS AGO

2342

\$  .  00

X3 ☐ None  
X1 ☐ DK  
X2 ☐ Ref.

\$ .00

\$ .00

\$ .00

\$ .00

TOTAL \$ .00

4 MONTHS AGO

2344

\$  .  00

X3 ☐ None  
X1 ☐ DK  
X2 ☐ Ref.

\$ .00

\$ .00

\$ .00

\$ .00

TOTAL \$ .00

CHECK  
ITEM S10

Is "DK" marked in all parts of item 18?

2346

1 ☐ Yes  
2 ☐ No — SKIP to Check Item S11

19. If we were to call back later would you (or . . .) be able to provide us with the amounts of income . . . received in each of these months? (Information about how much . . . received each month is very important to the results of our survey.)

2348

1 ☐ Yes — Mark Callback Summary and Reminder Card, Item 4b  
2 ☐ No

CHECK  
ITEM S11

Refer to item 15a, page 20.  
Is this business incorporated?

2350

1 ☐ Yes — SKIP to first ISS Code or Check Item P1, page 45  
2 ☐ No

CHECK  
ITEM S12

Has information about the net profit (or loss) for this business already been obtained by another household member?

2352

1 ☐ Yes — SKIP to first ISS Code or Check Item P1, page 45  
2 ☐ No

20a. Can you give me an estimate of the net profit or loss, that is, the difference between gross receipts and expenses, for this business during the 4-month period?

2354

1 ☐ Yes  
2 ☐ No — SKIP to first ISS Code or Check Item P1, page 45

b. What was the net profit or loss?

2356

\$  .  00

2358

X4 ☐ Loss in amount box — If "Broke even," mark \$1 in box.

SKIP to first  
ISS Code or  
Check Item  
P1, page 45

21. About how much did . . . earn from this business after expenses during the 4-month period?

2360

\$  .  00

X3 ☐ None  
X1 ☐ DK  
X2 ☐ Ref.

SKIP to first  
ISS Code or  
Check Item  
P1, page 45

## Section 3 — AMOUNTS

### Part A — GENERAL AMOUNTS (ISS Codes 1 — 56)

**1. You said . . . received (was authorized to receive)**  
(Read name of income type) **during the 4-month period.**  
(Read "was authorized to receive" if asking about  
Food Stamps — code 27.)

Income code                      Name of income type

**3000**

**CHECK  
ITEM A1**

Mark (X) income type code.

**3002**

- 1 ☐ ISS code 1 or 2 (SS or RR)  
2 ☐ ISS code 25 (WIC) — *SKIP to 14, page 24*  
3 ☐ ISS code 27 (Food Stamps) — *SKIP to 12a, page 24*  
4 ☐ ISS codes 37, 50, 51, 52, 53, or 56 — *SKIP to Check Item A4*  
5 ☐ Other ISS codes — *SKIP to 5a*

**CHECK  
ITEM A2**

Refer to cc item 27.  
Is . . . a designated parent, or guardian  
of children under age 18?

**3004**

- 1 ☐ Yes  
2 ☐ No — *SKIP to Check Item A3*

**2. During this 4-month period, were any separate  
payments from (Social Security/Railroad  
Retirement) received especially for . . . 's children?**

**3006**

- 1 ☐ Yes  
2 ☐ No — *SKIP to Check Item A3*

**3. Did . . . also receive a separate payment for  
(himself/herself) during any of these months?**

**3008**

- 1 ☐ Yes  
2 ☐ No — *SKIP to 10a*

**CHECK  
ITEM A3**

Is . . . married?

**3010**

- 1 ☐ Yes  
2 ☐ No — *SKIP to 5a*

**4. Did . . . receive Social Security (Railroad  
Retirement) jointly with . . . 's spouse?**

**3012**

- 1 ☐ Yes  
2 ☐ No — *SKIP to 5a*

**CHECK  
ITEM A4**

Has information about the amount received  
by . . . from the income source entered in 1  
already been recorded during an interview  
for . . . 's spouse?

**3014**

- 1 ☐ Yes — *SKIP to next ISS Code or Check Item  
P1, page 45*  
2 ☐ No

**5a. Did . . . receive any** (Read name of income type) **in**  
(Read each month)?

NOTE — Some persons receive more than one  
payment per month for certain income types such  
as Unemployment Compensation and AFDC.

**5b. How much did . . . receive**  
**in** (Read each month marked  
"Yes" in 5a)? **Please**  
**answer by giving the total**  
**amount each month**  
**before any deductions.**

(Last month) . . . . .

**3016**

- 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

**3018**

\$  .  00  
x1 ☐ DK  
x2 ☐ Ref.

(2 months ago) . . . . .

**3020**

- 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

**3022**

\$  .  00  
x1 ☐ DK  
x2 ☐ Ref.

(3 months ago) . . . . .

**3024**

- 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

**3026**

\$  .  00  
x1 ☐ DK  
x2 ☐ Ref.

(4 months ago) . . . . .

**3028**

- 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

**3030**

\$  .  00  
x1 ☐ DK  
x2 ☐ Ref.

**CHECK  
ITEM A5**

Mark (X) income type code.

**3032**

- 1 ☐ ISS code 1 or 2 — *SKIP to A7*  
2 ☐ ISS code 8 or 20 through 24  
3 ☐ All other income codes — *SKIP to next ISS  
Code or Check Item P1, page 45*

**6a. Were all the people living here covered by . . . 's  
payments?**

**3034**

- 1 ☐ Yes — *SKIP to Check Item A6*  
2 ☐ No

NOTES

Section 3 — AMOUNTS (Continued)		
Part A — GENERAL AMOUNTS (ISS Codes 1 — 56) (Continued)		
<b>6b. Which persons were covered?</b>	Person No.	Name
	3036	
	3038	
	3040	
	3042	
	3044	
	3046	
	3048	
	3050	
	3052	
	3054	
	<b>CHECK ITEM A6</b>	Is this ISS code "8"?
<b>7.</b>	Is . . . required to fill out an annual income questionnaire in order to receive a VA pension?	3060 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK } SKIP to next ISS Code or Check Item P1, page 45
<b>CHECK ITEM A7</b>	Was this ISS code marked for . . . in cc item 45 last reference period?	3062 1 <input type="checkbox"/> Yes — SKIP to Check Item A8 2 <input type="checkbox"/> No
<b>8.</b>	(SHOW FLASHCARD O) Social Security (Railroad Retirement) sends out checks in two different colored envelopes. Please look at this flashcard and tell me which color envelope . . . 's check comes in. (Remember, we are interested in the color of the envelope, not the color of the check.)	3064 1 <input type="checkbox"/> Blue 2 <input type="checkbox"/> Buff 3 <input type="checkbox"/> Direct Deposit 4 <input type="checkbox"/> Other x1 <input type="checkbox"/> DK
<b>9.</b>	Do . . . 's payments usually come on the first of the month or the third?	3066 1 <input type="checkbox"/> First 2 <input type="checkbox"/> Third 3 <input type="checkbox"/> Other x1 <input type="checkbox"/> DK
<b>CHECK ITEM A8</b>	Refer to item 2, page 22. Were (Social Security/Railroad Retirement) payments received especially for . . . 's children?	3068 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to next ISS Code or Check Item P1, page 45
<b>10a. Were Social Security (Railroad Retirement) payments received for . . . 's children in (Read each month)?</b>	(Last month) . . . . .	3070 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK
	(2 months ago) . . . . .	3074 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK
	(3 months ago) . . . . .	3078 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK
	(4 months ago) . . . . .	3082 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK
	<b>11a. Were all children living here covered by these payments?</b>	3086 1 <input type="checkbox"/> Yes — SKIP to next ISS Code or Check Item P1, page 45 2 <input type="checkbox"/> No
<b>10b. If "Yes" in 10a — How much was received?</b>		3072 \$ . 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
		3076 \$ . 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
		3080 \$ . 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
		3084 \$ . 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.

Section 3 — AMOUNTS (Continued)

Part A — GENERAL AMOUNTS (ISS Codes 1 — 56) (Continued)

11b. Which children were covered?

	Person No.	Name
3088	<input type="text"/>	<input type="text"/>
3090	<input type="text"/>	<input type="text"/>
3092	<input type="text"/>	<input type="text"/>
3094	<input type="text"/>	<input type="text"/>
3096	<input type="text"/>	<input type="text"/>
3098	<input type="text"/>	<input type="text"/>

SKIP to next ISS Code or Check Item P1, page 45

12a. Were all the people living here covered under ...'s food stamp allotment?

3100 1 ☐ Yes — SKIP to 13a  
2 ☐ No

b. Which persons were covered?

	Person No.	Name
3102	<input type="text"/>	<input type="text"/>
3104	<input type="text"/>	<input type="text"/>
3106	<input type="text"/>	<input type="text"/>
3108	<input type="text"/>	<input type="text"/>
3110	<input type="text"/>	<input type="text"/>
3112	<input type="text"/>	<input type="text"/>
3114	<input type="text"/>	<input type="text"/>
3116	<input type="text"/>	<input type="text"/>
3118	<input type="text"/>	<input type="text"/>
3120	<input type="text"/>	<input type="text"/>

13a. Did ... receive food stamps in (Read each month)?

(Last month) .....

3122 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

13b. If "Yes" in 13a, ask —  
What was the total amount?

3124 \$  00  
x1 ☐ DK  
x2 ☐ Ref.

(2 months ago) .....

3126 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

3128 \$  00  
x1 ☐ DK  
x2 ☐ Ref.

(3 months ago) .....

3130 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

3132 \$  00  
x1 ☐ DK  
x2 ☐ Ref.

(4 months ago) .....

3134 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

3136 \$  00  
x1 ☐ DK  
x2 ☐ Ref.

SKIP to next ISS Code or Check Item P1, page 45

14. Did ... receive any WIC vouchers in (Read each month)?

Mark (X) all that apply.

3138 1 ☐ Last month  
3140 2 ☐ 2 months ago  
3142 3 ☐ 3 months ago  
3144 4 ☐ 4 months ago

SKIP to next ISS Code or  
Check Item P1, page 45



## Section 3 — AMOUNTS

### Part A — GENERAL AMOUNTS (ISS Codes 1 — 56)

<b>1. You said . . . received (was authorized to receive)</b> <i>(Read name of income type) during the 4-month period.</i> <i>(Read "was authorized to receive" if asking about Food Stamps — code 27.)</i>	<div style="display: flex; justify-content: space-between;"> <div>Income code</div> <div>Name of income type</div> </div> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span><b>3200</b></span> <div style="border: 1px solid black; width: 100px; height: 20px;"></div> </div> </div>
<b>CHECK ITEM A1</b> <i>Mark (X) income type code.</i>	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span><b>3202</b></span> <div> <input type="checkbox"/> ISS code 1 or 2 (SS or RR)  <input type="checkbox"/> ISS code 25 (WIC) — <i>SKIP to 14, page 27</i>  <input type="checkbox"/> ISS code 27 (Food Stamps) — <i>SKIP to 12a, page 27</i>  <input type="checkbox"/> ISS codes 37, 50, 51, 52, 53, or 56 — <i>SKIP to Check Item A4</i>  <input type="checkbox"/> Other ISS codes — <i>SKIP to 5a</i> </div> </div> </div>
<b>CHECK ITEM A2</b> <i>Refer to cc item 27.</i> Is . . . a designated parent, or guardian of children under age 18?	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span><b>3204</b></span> <div> <input type="checkbox"/> Yes  <input type="checkbox"/> No — <i>SKIP to Check Item A3</i> </div> </div> </div>
<b>2. During this 4-month period, were any separate payments from (Social Security/Railroad Retirement) received especially for . . . 's children?</b>	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span><b>3206</b></span> <div> <input type="checkbox"/> Yes  <input type="checkbox"/> No — <i>SKIP to Check Item A3</i> </div> </div> </div>
<b>3. Did . . . also receive a separate payment for (himself/herself) during any of these months?</b>	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span><b>3208</b></span> <div> <input type="checkbox"/> Yes  <input type="checkbox"/> No — <i>SKIP to 10a</i> </div> </div> </div>
<b>CHECK ITEM A3</b> Is . . . married?	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span><b>3210</b></span> <div> <input type="checkbox"/> Yes  <input type="checkbox"/> No — <i>SKIP to 5a</i> </div> </div> </div>
<b>4. Did . . . receive Social Security (Railroad Retirement) jointly with . . . 's spouse?</b>	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span><b>3212</b></span> <div> <input type="checkbox"/> Yes  <input type="checkbox"/> No — <i>SKIP to 5a</i> </div> </div> </div>
<b>CHECK ITEM A4</b> Has information about the amount received by . . . from the income source entered in 1 already been recorded during an interview for . . . 's spouse?	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span><b>3214</b></span> <div> <input type="checkbox"/> Yes — <i>SKIP to next ISS Code or Check Item P1, page 45</i>  <input type="checkbox"/> No                         </div> </div> </div>
<b>5a. Did . . . receive any</b> <i>(Read name of income type) in (Read each month)?</i>  NOTE — Some persons receive more than one payment per month for certain income types such as Unemployment Compensation and AFDC.	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <b>5b. How much did . . . receive in</b> <i>(Read each month marked "Yes" in 5a)? Please answer by giving the total amount each month before any deductions.</i> </div> <div style="width: 5%; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">00</div> </div> </div> </div>
(Last month) . . . . .	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span><b>3216</b></span> <div> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> DK                             </div> </div> </div> </div> <div style="width: 5%; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">00</div> </div> </div> </div>
(2 months ago) . . . . .	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span><b>3220</b></span> <div> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> DK                             </div> </div> </div> </div> <div style="width: 5%; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">00</div> </div> </div> </div>
(3 months ago) . . . . .	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span><b>3224</b></span> <div> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> DK                             </div> </div> </div> </div> <div style="width: 5%; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">00</div> </div> </div> </div>
(4 months ago) . . . . .	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span><b>3228</b></span> <div> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> DK                             </div> </div> </div> </div> <div style="width: 5%; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">00</div> </div> </div> </div>
<b>CHECK ITEM A5</b> <i>Mark (X) income type code.</i>	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span><b>3232</b></span> <div> <input type="checkbox"/> ISS code 1 or 2 — <i>SKIP to A7</i>  <input type="checkbox"/> ISS code 8 or 20 through 24  <input type="checkbox"/> All other income codes — <i>SKIP to next ISS Code or Check Item P1, page 45</i> </div> </div> </div>
<b>6a. Were all the people living here covered by . . . 's payments?</b>	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span><b>3234</b></span> <div> <input type="checkbox"/> Yes — <i>SKIP to Check Item A6</i>  <input type="checkbox"/> No                         </div> </div> </div>
NOTES	

### Section 3 — AMOUNTS (Continued)

#### Part A — GENERAL AMOUNTS (ISS Codes 1 — 56) (Continued)

#### 6b. Which persons were covered?

	Person No.	Name
3236	<input type="text"/>	<input type="text"/>
3238	<input type="text"/>	<input type="text"/>
3240	<input type="text"/>	<input type="text"/>
3242	<input type="text"/>	<input type="text"/>
3244	<input type="text"/>	<input type="text"/>
3246	<input type="text"/>	<input type="text"/>
3248	<input type="text"/>	<input type="text"/>
3250	<input type="text"/>	<input type="text"/>
3252	<input type="text"/>	<input type="text"/>
3254	<input type="text"/>	<input type="text"/>

**CHECK ITEM A6** Is this ISS code "8"? **3256** 1 ☐ Yes  
2 ☐ No — SKIP to next ISS Code or Check Item P1, page 45

**7.** Is . . . required to fill out an annual income questionnaire in order to receive a VA pension? **3260** 1 ☐ Yes  
2 ☐ No } SKIP to next ISS Code or Check Item P1, page 45  
x1 ☐ DK

**CHECK ITEM A7** Was this ISS code marked for . . . in cc item 45 last reference period? **3262** 1 ☐ Yes — SKIP to Check Item A8  
2 ☐ No

**8.** (SHOW FLASHCARD O) Social Security (Railroad Retirement) sends out checks in two different colored envelopes. Please look at this flashcard and tell me which color envelope . . . 's check comes in. (Remember, we are interested in the color of the envelope, not the color of the check.) **3264** 1 ☐ Blue  
2 ☐ Buff  
3 ☐ Direct Deposit  
4 ☐ Other  
x1 ☐ DK

**9.** Do . . . 's payments usually come on the first of the month or the third? **3266** 1 ☐ First  
2 ☐ Third  
3 ☐ Other  
x1 ☐ DK

**CHECK ITEM A8** Refer to item 2, page 25. Were (Social Security/Railroad Retirement) payments received especially for . . . 's children? **3268** 1 ☐ Yes  
2 ☐ No — SKIP to next ISS Code or Check Item P1, page 45

#### 10a. Were Social Security (Railroad Retirement) payments received for . . . 's children in (Read each month)?

(Last month) . . . . . **3270** 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

(2 months ago) . . . . . **3274** 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

(3 months ago) . . . . . **3278** 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

(4 months ago) . . . . . **3282** 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

#### 10b. If "Yes" in 10a — How much was received?

**3272** \$  .  00  
x1 ☐ DK  
x2 ☐ Ref.

**3276** \$  .  00  
x1 ☐ DK  
x2 ☐ Ref.

**3280** \$  .  00  
x1 ☐ DK  
x2 ☐ Ref.

**3284** \$  .  00  
x1 ☐ DK  
x2 ☐ Ref.

**11a.** VERIFY IF ONLY ONE CHILD OR ASK — Were all children living here covered by these payments? **3286** 1 ☐ Yes — SKIP to next ISS Code or Check Item P1, page 45  
2 ☐ No

Section 3 – AMOUNTS (Continued)					
Part A – GENERAL AMOUNTS (ISS Codes 1 – 56) (Continued)					
<b>11b. Which children were covered?</b>	Person No.	Name			
	3288	<input type="text"/>	<input type="text"/>		
	3290	<input type="text"/>	<input type="text"/>		
	3292	<input type="text"/>	<input type="text"/>		
	3294	<input type="text"/>	<input type="text"/>		
	3296	<input type="text"/>	<input type="text"/>		
	3298	<input type="text"/>	<input type="text"/>		
SKIP to next ISS Code or Check Item P1, page 45					
<b>12a. Were all the people living here covered under ...'s food stamp allotment?</b>	3300	1 <input type="checkbox"/> Yes – SKIP to 13a 2 <input type="checkbox"/> No			
<b>b. Which persons were covered?</b>	Person No.	Name			
	3302	<input type="text"/>	<input type="text"/>		
	3304	<input type="text"/>	<input type="text"/>		
	3306	<input type="text"/>	<input type="text"/>		
	3308	<input type="text"/>	<input type="text"/>		
	3310	<input type="text"/>	<input type="text"/>		
	3312	<input type="text"/>	<input type="text"/>		
	3314	<input type="text"/>	<input type="text"/>		
	3316	<input type="text"/>	<input type="text"/>		
	3318	<input type="text"/>	<input type="text"/>		
	3320	<input type="text"/>	<input type="text"/>		
<b>13a. Did ... receive food stamps in (Read each month)?</b>	<b>13b. If "Yes" in 13a, ask – What was the total amount?</b>				
	(Last month) .....	3322	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK	3324	\$ <input type="text"/> <input type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
	(2 months ago) .....	3326	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK	3328	\$ <input type="text"/> <input type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
	(3 months ago) .....	3330	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK	3332	\$ <input type="text"/> <input type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
	(4 months ago) .....	3334	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK	3336	\$ <input type="text"/> <input type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
SKIP to next ISS Code or Check Item P1, page 45					
<b>14. Did ... receive any WIC vouchers in (Read each month)?</b> Mark (X) all that apply.	3338 3340 3342 3344	1 <input type="checkbox"/> Last month 2 <input type="checkbox"/> 2 months ago 3 <input type="checkbox"/> 3 months ago 4 <input type="checkbox"/> 4 months ago			
SKIP to next ISS Code or Check Item P1, page 45					



### Section 3 — AMOUNTS (Continued)

#### Part A — GENERAL AMOUNTS (ISS Codes 1 — 56) (Continued)

6b. Which persons were covered?		Person No.	Name
	3436	[ ] [ ] [ ]	
	3438	[ ] [ ] [ ]	
	3440	[ ] [ ] [ ]	
	3442	[ ] [ ] [ ]	
	3444	[ ] [ ] [ ]	
	3446	[ ] [ ] [ ]	
	3448	[ ] [ ] [ ]	
	3450	[ ] [ ] [ ]	
	3452	[ ] [ ] [ ]	
	3454	[ ] [ ] [ ]	
<b>CHECK ITEM A6</b>	Is this ISS code "8"?	<div style="display: flex; justify-content: space-between;"> <div> <b>3456</b> 1 <input type="checkbox"/> Yes  2 <input type="checkbox"/> No — SKIP to next ISS Code or Check Item P1, page 45 </div> </div>	
<b>7.</b>	Is ... required to fill out an annual income questionnaire in order to receive a VA pension?	<div style="display: flex; justify-content: space-between;"> <div> <b>3460</b> 1 <input type="checkbox"/> Yes  2 <input type="checkbox"/> No  x1 <input type="checkbox"/> DK </div> <div> } SKIP to next ISS Code or Check Item P1, page 45 </div> </div>	
<b>CHECK ITEM A7</b>	Was this ISS code marked for ... in cc item 45 last reference period?	<div style="display: flex; justify-content: space-between;"> <div> <b>3462</b> 1 <input type="checkbox"/> Yes — SKIP to Check Item A8  2 <input type="checkbox"/> No </div> </div>	
<b>8.</b>	(SHOW FLASHCARD O) Social Security (Railroad Retirement) sends out checks in two different colored envelopes. Please look at this flashcard and tell me which color envelope ...'s check comes in. (Remember, we are interested in the color of the envelope, not the color of the check.)	<div style="display: flex; justify-content: space-between;"> <div> <b>3464</b> 1 <input type="checkbox"/> Blue  2 <input type="checkbox"/> Buff  3 <input type="checkbox"/> Direct Deposit  4 <input type="checkbox"/> Other  x1 <input type="checkbox"/> DK </div> </div>	
<b>9.</b>	Do ...'s payments usually come on the first of the month or the third?	<div style="display: flex; justify-content: space-between;"> <div> <b>3466</b> 1 <input type="checkbox"/> First  2 <input type="checkbox"/> Third  3 <input type="checkbox"/> Other  x1 <input type="checkbox"/> DK </div> </div>	
<b>CHECK ITEM A8</b>	Refer to item 2, page 28. Were (Social Security/Railroad Retirement) payments received especially for ...'s children?	<div style="display: flex; justify-content: space-between;"> <div> <b>3468</b> 1 <input type="checkbox"/> Yes  2 <input type="checkbox"/> No — SKIP to next ISS Code or Check Item P1, page 45 </div> </div>	
<b>10a.</b>	Were Social Security (Railroad Retirement) payments received for ...'s children in (Read each month)?  (Last month) .....  (2 months ago) .....  (3 months ago) .....  (4 months ago) .....	<div style="display: flex; justify-content: space-between;"> <div> <b>3470</b> 1 <input type="checkbox"/> Yes  2 <input type="checkbox"/> No  x1 <input type="checkbox"/> DK </div> </div> <div style="display: flex; justify-content: space-between;"> <div> <b>3474</b> 1 <input type="checkbox"/> Yes  2 <input type="checkbox"/> No  x1 <input type="checkbox"/> DK </div> </div> <div style="display: flex; justify-content: space-between;"> <div> <b>3478</b> 1 <input type="checkbox"/> Yes  2 <input type="checkbox"/> No  x1 <input type="checkbox"/> DK </div> </div> <div style="display: flex; justify-content: space-between;"> <div> <b>3482</b> 1 <input type="checkbox"/> Yes  2 <input type="checkbox"/> No  x1 <input type="checkbox"/> DK </div> </div>	<b>10b.</b> If "Yes" in 10a — How much was received?  <div style="display: flex; justify-content: space-between;"> <div> <b>3472</b> \$ [ ] [ ] [ ] . 00  x1 <input type="checkbox"/> DK  x2 <input type="checkbox"/> Ref. </div> </div> <div style="display: flex; justify-content: space-between;"> <div> <b>3476</b> \$ [ ] [ ] [ ] . 00  x1 <input type="checkbox"/> DK  x2 <input type="checkbox"/> Ref. </div> </div> <div style="display: flex; justify-content: space-between;"> <div> <b>3480</b> \$ [ ] [ ] [ ] . 00  x1 <input type="checkbox"/> DK  x2 <input type="checkbox"/> Ref. </div> </div> <div style="display: flex; justify-content: space-between;"> <div> <b>3484</b> \$ [ ] [ ] [ ] . 00  x1 <input type="checkbox"/> DK  x2 <input type="checkbox"/> Ref. </div> </div>
<b>11a.</b>	VERIFY IF ONLY ONE CHILD OR ASK — Were all children living here covered by these payments?	<div style="display: flex; justify-content: space-between;"> <div> <b>3486</b> 1 <input type="checkbox"/> Yes — SKIP to next ISS Code or Check Item P1, page 45  2 <input type="checkbox"/> No </div> </div>	

### Section 3 – AMOUNTS (Continued)

#### Part A – GENERAL AMOUNTS (ISS Codes 1 – 56) (Continued)

**11b. Which children were covered?**

	Person No.	Name
3488	<input type="text"/>	<input type="text"/>
3490	<input type="text"/>	<input type="text"/>
3492	<input type="text"/>	<input type="text"/>
3494	<input type="text"/>	<input type="text"/>
3496	<input type="text"/>	<input type="text"/>
3498	<input type="text"/>	<input type="text"/>

**SKIP to next ISS Code or Check Item P1, page 45**

**12a. Were all the people living here covered under ...'s food stamp allotment?**

3500 1 ☐ Yes — SKIP to 13a  
2 ☐ No

**b. Which persons were covered?**

	Person No.	Name
3502	<input type="text"/>	<input type="text"/>
3504	<input type="text"/>	<input type="text"/>
3506	<input type="text"/>	<input type="text"/>
3508	<input type="text"/>	<input type="text"/>
3510	<input type="text"/>	<input type="text"/>
3512	<input type="text"/>	<input type="text"/>
3514	<input type="text"/>	<input type="text"/>
3516	<input type="text"/>	<input type="text"/>
3518	<input type="text"/>	<input type="text"/>
3520	<input type="text"/>	<input type="text"/>

**13a. Did ... receive food stamps in (Read each month)?**

(Last month) .....

3522 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

(2 months ago) .....

3526 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

(3 months ago) .....

3530 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

(4 months ago) .....

3534 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

**13b. If "Yes" in 13a, ask — What was the total amount?**

3524 \$  . 00  
x1 ☐ DK  
x2 ☐ Ref.

3528 \$  . 00  
x1 ☐ DK  
x2 ☐ Ref.

3532 \$  . 00  
x1 ☐ DK  
x2 ☐ Ref.

3536 \$  . 00  
x1 ☐ DK  
x2 ☐ Ref.

**SKIP to next ISS Code or Check Item P1, page 45**

**14. Did ... receive any WIC vouchers in (Read each month)?**

Mark (X) all that apply.

3538 1 ☐ Last month  
3540 2 ☐ 2 months ago  
3542 3 ☐ 3 months ago  
3544 4 ☐ 4 months ago

**SKIP to next ISS Code or Check Item P1, page 45**

## Section 3 — AMOUNTS

### Part A — GENERAL AMOUNTS (ISS Codes 1 — 56)

<b>1. You said . . . received (was authorized to receive)</b> <i>(Read name of income type) during the 4-month period.</i> <i>(Read "was authorized to receive" if asking about Food Stamps — code 27.)</i>	Income code      Name of income type <div style="border: 1px solid black; display: inline-block; padding: 2px;">3600</div> <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block; vertical-align: middle;"></div>
<b>CHECK ITEM A1</b> <i>Mark (X) income type code.</i>	<div style="border: 1px solid black; display: inline-block; padding: 2px;">3602</div> 1 <input type="checkbox"/> ISS code 1 or 2 (SS or RR) 2 <input type="checkbox"/> ISS code 25 (WIC) — <i>SKIP to 14, page 33</i> 3 <input type="checkbox"/> ISS code 27 (Food Stamps) — <i>SKIP to 12a, page 33</i> 4 <input type="checkbox"/> ISS codes 37, 50, 51, 52, 53, or 56 — <i>SKIP to Check Item A4</i> 5 <input type="checkbox"/> Other ISS codes — <i>SKIP to 5a</i>
<b>CHECK ITEM A2</b> <i>Refer to cc item 27.</i> Is . . . a designated parent, or guardian of children under age 18?	<div style="border: 1px solid black; display: inline-block; padding: 2px;">3604</div> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — <i>SKIP to Check Item A3</i>
<b>2. During this 4-month period, were any separate payments from (Social Security/Railroad Retirement) received especially for . . . 's children?</b>	<div style="border: 1px solid black; display: inline-block; padding: 2px;">3606</div> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — <i>SKIP to Check Item A3</i>
<b>3. Did . . . also receive a separate payment for (himself/herself) during any of these months?</b>	<div style="border: 1px solid black; display: inline-block; padding: 2px;">3608</div> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — <i>SKIP to 10a</i>
<b>CHECK ITEM A3</b> Is . . . married?	<div style="border: 1px solid black; display: inline-block; padding: 2px;">3610</div> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — <i>SKIP to 5a</i>
<b>4. Did . . . receive Social Security (Railroad Retirement) jointly with . . . 's spouse?</b>	<div style="border: 1px solid black; display: inline-block; padding: 2px;">3612</div> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — <i>SKIP to 5a</i>
<b>CHECK ITEM A4</b> Has information about the amount received by . . . from the income source entered in 1 already been recorded during an interview for . . . 's spouse?	<div style="border: 1px solid black; display: inline-block; padding: 2px;">3614</div> 1 <input type="checkbox"/> Yes — <i>SKIP to next ISS Code or Check Item P1, page 45</i> 2 <input type="checkbox"/> No
<b>5a. Did . . . receive any</b> <i>(Read name of income type) in (Read each month)?</i>  NOTE — Some persons receive more than one payment per month for certain income types such as Unemployment Compensation and AFDC.	<b>5b. How much did . . . receive in</b> <i>(Read each month marked "Yes" in 5a)? Please answer by giving the total amount each month before any deductions.</i>
(Last month) . . . . .	<div style="border: 1px solid black; display: inline-block; padding: 2px;">3616</div> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK
(2 months ago) . . . . .	<div style="border: 1px solid black; display: inline-block; padding: 2px;">3620</div> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK
(3 months ago) . . . . .	<div style="border: 1px solid black; display: inline-block; padding: 2px;">3624</div> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK
(4 months ago) . . . . .	<div style="border: 1px solid black; display: inline-block; padding: 2px;">3628</div> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK
<b>CHECK ITEM A5</b> <i>Mark (X) income type code.</i>	<div style="border: 1px solid black; display: inline-block; padding: 2px;">3632</div> 1 <input type="checkbox"/> ISS code 1 or 2 — <i>SKIP to A7</i> 2 <input type="checkbox"/> ISS code 8 or 20 through 24 3 <input type="checkbox"/> All other income codes — <i>SKIP to next ISS Code or Check Item P1, page 45</i>
<b>6a. Were all the people living here covered by . . . 's payments?</b>	<div style="border: 1px solid black; display: inline-block; padding: 2px;">3634</div> 1 <input type="checkbox"/> Yes — <i>SKIP to Check Item A6</i> 2 <input type="checkbox"/> No
NOTES	

### Section 3 — AMOUNTS (Continued)

#### Part A — GENERAL AMOUNTS (ISS Codes 1—56) (Continued)

##### 6b. Which persons were covered?

	Person No.	Name
3636	<input type="text"/>	<input type="text"/>
3638	<input type="text"/>	<input type="text"/>
3640	<input type="text"/>	<input type="text"/>
3642	<input type="text"/>	<input type="text"/>
3644	<input type="text"/>	<input type="text"/>
3646	<input type="text"/>	<input type="text"/>
3648	<input type="text"/>	<input type="text"/>
3650	<input type="text"/>	<input type="text"/>
3652	<input type="text"/>	<input type="text"/>
3654	<input type="text"/>	<input type="text"/>

##### CHECK ITEM A6

Is this ISS code "8"?

3656 1 ☐ Yes  
2 ☐ No — SKIP to next ISS Code or Check Item P1, page 45

##### 7. Is ... required to fill out an annual income questionnaire in order to receive a VA pension?

3660 1 ☐ Yes  
2 ☐ No } SKIP to next ISS Code or Check Item P1, page 45  
x1 ☐ DK

##### CHECK ITEM A7

Was this ISS code marked for ... in cc item 45 last reference period?

3662 1 ☐ Yes — SKIP to Check Item A8  
2 ☐ No

(SHOW FLASHCARD 0)

##### 8. Social Security (Railroad Retirement) sends out checks in two different colored envelopes. Please look at this flashcard and tell me which color envelope ...'s check comes in. (Remember, we are interested in the color of the envelope, not the color of the check.)

3664 1 ☐ Blue  
2 ☐ Buff  
3 ☐ Direct Deposit  
4 ☐ Other  
x1 ☐ DK

##### 9. Do ...'s payments usually come on the first of the month or the third?

3666 1 ☐ First  
2 ☐ Third  
3 ☐ Other  
x1 ☐ DK

##### CHECK ITEM A8

Refer to item 2, page 31.  
Were (Social Security/Railroad Retirement) payments received especially for ...'s children?

3668 1 ☐ Yes  
2 ☐ No — SKIP to next ISS Code or Check Item P1, page 45

##### 10a. Were Social Security (Railroad Retirement) payments received for ...'s children in (Read each month)?

(Last month) .....

3670 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

(2 months ago) .....

3674 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

(3 months ago) .....

3678 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

(4 months ago) .....

3682 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

##### 10b. If "Yes" in 10a — How much was received?

3672 \$  .  00  
x1 ☐ DK  
x2 ☐ Ref.

3676 \$  .  00  
x1 ☐ DK  
x2 ☐ Ref.

3680 \$  .  00  
x1 ☐ DK  
x2 ☐ Ref.

3684 \$  .  00  
x1 ☐ DK  
x2 ☐ Ref.

##### 11a. Were all children living here covered by these payments?

VERIFY IF ONLY ONE CHILD OR ASK —

3686 1 ☐ Yes — SKIP to next ISS Code or Check Item P1, page 45  
2 ☐ No



Section 3 – AMOUNTS (Continued)					
Part A – GENERAL AMOUNTS (ISS Codes 1 – 56) (Continued)					
<b>11b. Which children were covered?</b>	Person No.	Name			
	3688	<input type="text"/>	<input type="text"/>		
	3690	<input type="text"/>	<input type="text"/>		
	3692	<input type="text"/>	<input type="text"/>		
	3694	<input type="text"/>	<input type="text"/>		
	3696	<input type="text"/>	<input type="text"/>		
	3698	<input type="text"/>	<input type="text"/>		
SKIP to next ISS Code or Check Item P1, page 45					
<b>12a. Were all the people living here covered under ...'s food stamp allotment?</b>	3700	1 <input type="checkbox"/> Yes – SKIP to 13a 2 <input type="checkbox"/> No			
<b>b. Which persons were covered?</b>	Person No.	Name			
	3702	<input type="text"/>	<input type="text"/>		
	3704	<input type="text"/>	<input type="text"/>		
	3706	<input type="text"/>	<input type="text"/>		
	3708	<input type="text"/>	<input type="text"/>		
	3710	<input type="text"/>	<input type="text"/>		
	3712	<input type="text"/>	<input type="text"/>		
	3714	<input type="text"/>	<input type="text"/>		
	3716	<input type="text"/>	<input type="text"/>		
	3718	<input type="text"/>	<input type="text"/>		
3720	<input type="text"/>	<input type="text"/>			
<b>13a. Did ... receive food stamps in (Read each month)?</b>	<b>13b. If "Yes" in 13a, ask – What was the total amount?</b>				
	(Last month) .....	3722	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK	3724	\$ <input type="text"/> <input type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
	(2 months ago) .....	3726	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK	3728	\$ <input type="text"/> <input type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
	(3 months ago) .....	3730	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK	3732	\$ <input type="text"/> <input type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
	(4 months ago) .....	3734	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK	3736	\$ <input type="text"/> <input type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
SKIP to next ISS Code or Check Item P1, page 45					
<b>14. Did ... receive any WIC vouchers in (Read each month)?</b> Mark (X) all that apply.	3738	1 <input type="checkbox"/> Last month 2 <input type="checkbox"/> 2 months ago 3 <input type="checkbox"/> 3 months ago 4 <input type="checkbox"/> 4 months ago } SKIP to next ISS Code or Check Item P1, page 45			
	3740				
	3742				
	3744				

## Section 3 — AMOUNTS

### Part A — GENERAL AMOUNTS (ISS Codes 1 — 56)

**1. You said . . . received (was authorized to receive)**  
(Read name of income type) **during the 4-month period.**  
(Read "was authorized to receive" if asking about  
Food Stamps — code 27.)

Income code                      Name of income type

**3800**

**CHECK  
ITEM A1**

Mark (X) income type code.

**3802**

- 1 ☐ ISS code 1 or 2 (SS or RR)  
2 ☐ ISS code 25 (WIC) — *SKIP to 14, page 36*  
3 ☐ ISS code 27 (Food Stamps) — *SKIP to 12a, page 36*  
4 ☐ ISS codes 37, 50, 51, 52, 53, or 56 — *SKIP to Check Item A4*  
5 ☐ Other ISS codes — *SKIP to 5a*

**CHECK  
ITEM A2**

Refer to cc item 27.

Is . . . a designated parent, or guardian  
of children under age 18?

**3804**

- 1 ☐ Yes  
2 ☐ No — *SKIP to Check Item A3*

**2. During this 4-month period, were any separate  
payments from (Social Security/Railroad  
Retirement) received especially for . . . 's children?**

**3806**

- 1 ☐ Yes  
2 ☐ No — *SKIP to Check Item A3*

**3. Did . . . also receive a separate payment for  
(himself/herself) during any of these months?**

**3808**

- 1 ☐ Yes  
2 ☐ No — *SKIP to 10a*

**CHECK  
ITEM A3**

Is . . . married?

**3810**

- 1 ☐ Yes  
2 ☐ No — *SKIP to 5a*

**4. Did . . . receive Social Security (Railroad  
Retirement) jointly with . . . 's spouse?**

**3812**

- 1 ☐ Yes  
2 ☐ No — *SKIP to 5a*

**CHECK  
ITEM A4**

Has information about the amount received  
by . . . from the income source entered in 1  
already been recorded during an interview  
for . . . 's spouse?

**3814**

- 1 ☐ Yes — *SKIP to next ISS Code or Check Item  
P1, page 45*  
2 ☐ No

**5a. Did . . . receive any** (Read name of income type) **in**  
(Read each month)?

NOTE — Some persons receive more than one  
payment per month for certain income types such  
as Unemployment Compensation and AFDC.

(Last month) . . . . .

**3816**

- 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

(2 months ago) . . . . .

**3820**

- 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

(3 months ago) . . . . .

**3824**

- 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

(4 months ago) . . . . .

**3828**

- 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

**5b. How much did . . . receive**  
**in** (Read each month marked  
"Yes" in 5a)? **Please**  
**answer by giving the total**  
**amount each month**  
**before any deductions.**

**3818**

\$ . 00

- x1 ☐ DK  
x2 ☐ Ref.

**3822**

\$ . 00

- x1 ☐ DK  
x2 ☐ Ref.

**3826**

\$ . 00

- x1 ☐ DK  
x2 ☐ Ref.

**3830**

\$ . 00

- x1 ☐ DK  
x2 ☐ Ref.

**CHECK  
ITEM A5**

Mark (X) income type code.

**3832**

- 1 ☐ ISS code 1 or 2 — *SKIP to A7*  
2 ☐ ISS code 8 or 20 through 24  
3 ☐ All other income codes — *SKIP to next ISS  
Code or Check Item P1, page 45*

**6a. Were all the people living here covered by . . . 's  
payments?**

**3834**

- 1 ☐ Yes — *SKIP to Check Item A6*  
2 ☐ No

NOTES

Section 3 — AMOUNTS (Continued)		
Part A — GENERAL AMOUNTS (ISS Codes 1 — 56) (Continued)		
<b>6b. Which persons were covered?</b>		
	Person No.	Name
	3836	
	3838	
	3840	
	3842	
	3844	
	3846	
	3848	
	3850	
	3852	
	3854	
<b>CHECK ITEM A6</b>	Is this ISS code "8"?	
	3856	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to next ISS Code or Check Item P1, page 45
<b>7. Is ... required to fill out an annual income questionnaire in order to receive a VA pension?</b>	3860	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK } SKIP to next ISS Code or Check Item P1, page 45
<b>CHECK ITEM A7</b>	Was this ISS code marked for ... in cc item 45 last reference period?	
	3862	1 <input type="checkbox"/> Yes — SKIP to Check Item A8 2 <input type="checkbox"/> No
<b>8. Social Security (Railroad Retirement) sends out checks in two different colored envelopes. Please look at this flashcard and tell me which color envelope ...'s check comes in. (Remember, we are interested in the color of the envelope, not the color of the check.)</b>	3864	1 <input type="checkbox"/> Blue 2 <input type="checkbox"/> Buff 3 <input type="checkbox"/> Direct Deposit 4 <input type="checkbox"/> Other x1 <input type="checkbox"/> DK
<b>9. Do ...'s payments usually come on the first of the month or the third?</b>	3866	1 <input type="checkbox"/> First 2 <input type="checkbox"/> Third 3 <input type="checkbox"/> Other x1 <input type="checkbox"/> DK
<b>CHECK ITEM A8</b>	Refer to item 2, page 34. Were (Social Security/Railroad Retirement) payments received especially for ...'s children?	
	3868	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to next ISS Code or Check Item P1, page 45
<b>10a. Were Social Security (Railroad Retirement) payments received for ...'s children in (Read each month)?</b>		
(Last month) .....	3870	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK
(2 months ago) .....	3874	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK
(3 months ago) .....	3878	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK
(4 months ago) .....	3882	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK
<b>10b. If "Yes" in 10a — How much was received?</b>		
	3872	\$ <input type="text"/> . <input type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
	3876	\$ <input type="text"/> . <input type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
	3880	\$ <input type="text"/> . <input type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
	3884	\$ <input type="text"/> . <input type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
<b>11a. Were all children living here covered by these payments?</b>		
	3886	1 <input type="checkbox"/> Yes — SKIP to next ISS Code or Check Item P1, page 45 2 <input type="checkbox"/> No

### Section 3 – AMOUNTS (Continued)

#### Part A – GENERAL AMOUNTS (ISS Codes 1 – 56) (Continued)

**11b. Which children were covered?**

	Person No.	Name
<b>3888</b>	<input type="text"/>	<input type="text"/>
<b>3890</b>	<input type="text"/>	<input type="text"/>
<b>3892</b>	<input type="text"/>	<input type="text"/>
<b>3894</b>	<input type="text"/>	<input type="text"/>
<b>3896</b>	<input type="text"/>	<input type="text"/>
<b>3898</b>	<input type="text"/>	<input type="text"/>

**SKIP to next ISS Code or Check Item P1, page 45**

**12a. Were all the people living here covered under ...'s food stamp allotment?**

**3900** 1 ☐ Yes — SKIP to 13a  
2 ☐ No

**b. Which persons were covered?**

	Person No.	Name
<b>3902</b>	<input type="text"/>	<input type="text"/>
<b>3904</b>	<input type="text"/>	<input type="text"/>
<b>3906</b>	<input type="text"/>	<input type="text"/>
<b>3908</b>	<input type="text"/>	<input type="text"/>
<b>3910</b>	<input type="text"/>	<input type="text"/>
<b>3912</b>	<input type="text"/>	<input type="text"/>
<b>3914</b>	<input type="text"/>	<input type="text"/>
<b>3916</b>	<input type="text"/>	<input type="text"/>
<b>3918</b>	<input type="text"/>	<input type="text"/>
<b>3920</b>	<input type="text"/>	<input type="text"/>

**13a. Did ... receive food stamps in (Read each month)?**

**13b. If "Yes" in 13a, ask — What was the total amount?**

(Last month) .....

**3922** 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

**3924** \$  .  00  
x1 ☐ DK  
x2 ☐ Ref.

(2 months ago) .....

**3926** 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

**3928** \$  .  00  
x1 ☐ DK  
x2 ☐ Ref.

(3 months ago) .....

**3930** 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

**3932** \$  .  00  
x1 ☐ DK  
x2 ☐ Ref.

(4 months ago) .....

**3934** 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

**3936** \$  .  00  
x1 ☐ DK  
x2 ☐ Ref.

**SKIP to next ISS Code or Check Item P1, page 45**

**14. Did ... receive any WIC vouchers in (Read each month)?**

**3938** 1 ☐ Last month  
**3940** 2 ☐ 2 months ago  
**3942** 3 ☐ 3 months ago  
**3944** 4 ☐ 4 months ago

**SKIP to next ISS Code or Check Item P1, page 45**

Mark (X) all that apply.

## Section 3 — AMOUNTS

### Part A — GENERAL AMOUNTS (ISS Codes 1 — 56)

<b>1. You said . . . received (was authorized to receive)</b> <i>(Read name of income type) during the 4-month period.</i> <i>(Read "was authorized to receive" if asking about Food Stamps — code 27.)</i>	Income code      Name of income type <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>
<b>CHECK ITEM A1</b> <i>Mark (X) income type code.</i>	<b>4000</b> <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>
<b>CHECK ITEM A2</b> <i>Refer to cc item 27.</i> Is . . . a designated parent, or guardian of children under age 18?	<b>4002</b> 1 <input type="checkbox"/> ISS code 1 or 2 (SS or RR) 2 <input type="checkbox"/> ISS code 25 (WIC) — <i>SKIP to 14, page 39</i> 3 <input type="checkbox"/> ISS code 27 (Food Stamps) — <i>SKIP to 12a, page 39</i> 4 <input type="checkbox"/> ISS codes 37, 50, 51, 52, 53, or 56 — <i>SKIP to Check Item A4</i> 5 <input type="checkbox"/> Other ISS codes — <i>SKIP to 5a</i>
<b>2. During this 4-month period, were any separate payments from (Social Security/Railroad Retirement) received especially for . . .'s children?</b>	<b>4004</b> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — <i>SKIP to Check Item A3</i>
<b>3. Did . . . also receive a separate payment for (himself/herself) during any of these months?</b>	<b>4006</b> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — <i>SKIP to Check Item A3</i>
<b>CHECK ITEM A3</b> Is . . . married?	<b>4008</b> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — <i>SKIP to 10a</i>
<b>4. Did . . . receive Social Security (Railroad Retirement) jointly with . . .'s spouse?</b>	<b>4010</b> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — <i>SKIP to 5a</i>
<b>CHECK ITEM A4</b> Has information about the amount received by . . . from the income source entered in 1 already been recorded during an interview for . . .'s spouse?	<b>4012</b> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — <i>SKIP to 5a</i>
<b>5a. Did . . . receive any</b> <i>(Read name of income type) in (Read each month)?</i>  NOTE — Some persons receive more than one payment per month for certain income types such as Unemployment Compensation and AFDC.	<b>5b. How much did . . . receive in</b> <i>(Read each month marked "Yes" in 5a)? Please answer by giving the total amount each month before any deductions.</i>
(Last month) . . . . .	<div style="display: flex; justify-content: space-between;"> <div> <b>4016</b>                                   1 <input type="checkbox"/> Yes                              2 <input type="checkbox"/> No                              x1 <input type="checkbox"/> DK                         </div> <div> <b>4018</b>                                   \$ <div style="border: 1px solid black; width: 60px; height: 20px; display: inline-block;"></div> . <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">00</div>                              x1 <input type="checkbox"/> DK                              x2 <input type="checkbox"/> Ref.                         </div> </div>
(2 months ago) . . . . .	<div style="display: flex; justify-content: space-between;"> <div> <b>4020</b>                                   1 <input type="checkbox"/> Yes                              2 <input type="checkbox"/> No                              x1 <input type="checkbox"/> DK                         </div> <div> <b>4022</b>                                   \$ <div style="border: 1px solid black; width: 60px; height: 20px; display: inline-block;"></div> . <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">00</div>                              x1 <input type="checkbox"/> DK                              x2 <input type="checkbox"/> Ref.                         </div> </div>
(3 months ago) . . . . .	<div style="display: flex; justify-content: space-between;"> <div> <b>4024</b>                                   1 <input type="checkbox"/> Yes                              2 <input type="checkbox"/> No                              x1 <input type="checkbox"/> DK                         </div> <div> <b>4026</b>                                   \$ <div style="border: 1px solid black; width: 60px; height: 20px; display: inline-block;"></div> . <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">00</div>                              x1 <input type="checkbox"/> DK                              x2 <input type="checkbox"/> Ref.                         </div> </div>
(4 months ago) . . . . .	<div style="display: flex; justify-content: space-between;"> <div> <b>4028</b>                                   1 <input type="checkbox"/> Yes                              2 <input type="checkbox"/> No                              x1 <input type="checkbox"/> DK                         </div> <div> <b>4030</b>                                   \$ <div style="border: 1px solid black; width: 60px; height: 20px; display: inline-block;"></div> . <div style="border: 1px solid black; width: 20px; height: 20px; text-align: center; line-height: 20px;">00</div>                              x1 <input type="checkbox"/> DK                              x2 <input type="checkbox"/> Ref.                         </div> </div>
<b>CHECK ITEM A5</b> <i>Mark (X) income type code.</i>	<b>4032</b> 1 <input type="checkbox"/> ISS code 1 or 2 — <i>SKIP to A7</i> 2 <input type="checkbox"/> ISS code 8 or 20 through 24 3 <input type="checkbox"/> All other income codes — <i>SKIP to next ISS Code or Check Item P1, page 45</i>
<b>6a. Were all the people living here covered by . . .'s payments?</b>	<b>4034</b> 1 <input type="checkbox"/> Yes — <i>SKIP to Check Item A6</i> 2 <input type="checkbox"/> No
NOTES	

### Section 3 — AMOUNTS (Continued)

#### Part A — GENERAL AMOUNTS (ISS Codes 1 — 56) (Continued)

#### 6b. Which persons were covered?

	Person No.	Name
4036	<input type="text"/>	<input type="text"/>
4038	<input type="text"/>	<input type="text"/>
4040	<input type="text"/>	<input type="text"/>
4042	<input type="text"/>	<input type="text"/>
4044	<input type="text"/>	<input type="text"/>
4046	<input type="text"/>	<input type="text"/>
4048	<input type="text"/>	<input type="text"/>
4050	<input type="text"/>	<input type="text"/>
4052	<input type="text"/>	<input type="text"/>
4054	<input type="text"/>	<input type="text"/>

#### CHECK ITEM A6

Is this ISS code "8"?

4056 1 ☐ Yes  
2 ☐ No — SKIP to next ISS Code or Check Item P1, page 45

#### 7. Is . . . required to fill out an annual income questionnaire in order to receive a VA pension?

4060 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK } SKIP to next ISS Code or Check Item P1, page 45

#### CHECK ITEM A7

Was this ISS code marked for . . . in cc item 45 last reference period?

4062 1 ☐ Yes — SKIP to Check Item A8  
2 ☐ No

#### 8. Social Security (Railroad Retirement) sends out checks in two different colored envelopes. Please look at this flashcard and tell me which color envelope . . . 's check comes in. (Remember, we are interested in the color of the envelope, not the color of the check.)

4064 1 ☐ Blue  
2 ☐ Buff  
3 ☐ Direct Deposit  
4 ☐ Other  
x1 ☐ DK

#### 9. Do . . . 's payments usually come on the first of the month or the third?

4066 1 ☐ First  
2 ☐ Third  
3 ☐ Other  
x1 ☐ DK

#### CHECK ITEM A8

Refer to item 2, page 37.  
Were (Social Security/Railroad Retirement) payments received especially for . . . 's children?

4068 1 ☐ Yes  
2 ☐ No — SKIP to next ISS Code or Check Item P1, page 45

#### 10a. Were Social Security (Railroad Retirement) payments received for . . . 's children in (Read each month)?

(Last month) . . . . .

4070 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

(2 months ago) . . . . .

4074 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

(3 months ago) . . . . .

4078 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

(4 months ago) . . . . .

4082 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK

#### 10b. If "Yes" in 10a — How much was received?

4072 \$  .  00  
x1 ☐ DK  
x2 ☐ Ref.

4076 \$  .  00  
x1 ☐ DK  
x2 ☐ Ref.

4080 \$  .  00  
x1 ☐ DK  
x2 ☐ Ref.

4084 \$  .  00  
x1 ☐ DK  
x2 ☐ Ref.

#### 11a. Were all children living here covered by these payments?

VERIFY IF ONLY ONE CHILD OR ASK —

4086 1 ☐ Yes — SKIP to next ISS Code or Check Item P1, page 45  
2 ☐ No

Section 3 – AMOUNTS (Continued)			
Part A – GENERAL AMOUNTS (ISS Codes 1–56) (Continued)			
<b>11b. Which children were covered?</b>		Person No.	Name
	4088		
	4090		
	4092		
	4094		
	4096		
	4098		
SKIP to next ISS Code or Check Item P1, page 45			
<b>12a. Were all the people living here covered under ...'s food stamp allotment?</b>	4100	1 <input type="checkbox"/> Yes – SKIP to 13a 2 <input type="checkbox"/> No	
<b>b. Which persons were covered?</b>		Person No.	Name
	4102		
	4104		
	4106		
	4108		
	4110		
	4112		
	4114		
	4116		
	4118		
	4120		
<b>13a. Did ... receive food stamps in (Read each month)?</b>		<b>13b. If "Yes" in 13a, ask – What was the total amount?</b>	
(Last month) .....	4122	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK	4124 \$ . 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
(2 months ago) .....	4126	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK	4128 \$ . 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
(3 months ago) .....	4130	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK	4132 \$ . 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
(4 months ago) .....	4134	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK	4136 \$ . 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
SKIP to next ISS Code or Check Item P1, page 45			
<b>14. Did ... receive any WIC vouchers in (Read each month)?</b> Mark (X) all that apply.	4138	} SKIP to next ISS Code or Check Item P1, page 45	
	4140		
	4142		
	4144		

### Section 3 — AMOUNTS (Continued)

#### Part B — SAVINGS ACCOUNTS, MONEY MARKET DEPOSIT ACCOUNTS, CERTIFICATES OF DEPOSIT, AND INTEREST-EARNING CHECKING ACCOUNTS (ISS Codes 100, 101, 102 and 103)

<b>CHECK ITEM A9</b>	Asset types owned. Mark (X) all that apply.	<b>4300</b>	1 <input type="checkbox"/> ISS Code 100 — Regular/Passbook Savings Accounts
		<b>4302</b>	2 <input type="checkbox"/> ISS Code 101 — Money Market Deposit Accounts
		<b>4304</b>	3 <input type="checkbox"/> ISS Code 102 — Certificates of Deposit or other Savings Certificates
		<b>4306</b>	4 <input type="checkbox"/> ISS Code 103 — Interest-earning Checking Accounts (such as NOW or Super-NOW accounts)

**1. Earlier you said that . . . had** (Read names of owned assets).

<b>CHECK ITEM A10</b>	Interview status of . . . 's spouse.	<b>4308</b>	1 <input type="checkbox"/> No spouse in household — <i>SKIP to 3b</i>
			2 <input type="checkbox"/> Interview for spouse not yet conducted
			3 <input type="checkbox"/> Interview for spouse already conducted — <i>SKIP to 3a</i>

**2a. Did . . . own any of these jointly with . . . 's (husband/wife)?**

<b>4310</b>	1 <input type="checkbox"/> Yes
	2 <input type="checkbox"/> No — <i>SKIP to 3b</i>

**b. What is your best estimate of the total amount of interest earned on these jointly held** (Read asset types) **during the 4-month period?**

<b>4312</b>	\$	.	<b>00</b>	— <i>SKIP to 3a</i>
	x3 <input type="checkbox"/> None — <i>SKIP to 3a</i>			
	x1 <input type="checkbox"/> DK			
	x2 <input type="checkbox"/> Ref. — <i>SKIP to next ISS Code or Check Item P1, page 45</i>			

**c. What is your best estimate of the average amount that . . . and . . . 's (husband/wife) had in these jointly held** (Read asset types) **during the 4-month period?**



<b>4314</b>	\$	.	<b>00</b>	— <i>SKIP to 3a</i>
	x1 <input type="checkbox"/> DK			
	x2 <input type="checkbox"/> Ref. — <i>SKIP to next ISS Code or Check Item P1, page 45</i>			

**d. If I were to call back later would you be able to provide me with an estimate of the average amount? (This information is especially important for the purposes of this survey.)**

<b>4316</b>	1 <input type="checkbox"/> Yes — <i>Mark Callback Summary and Reminder Card, Item 5</i>
	2 <input type="checkbox"/> No

**3a. Besides any** (Read asset types) **owned jointly with . . . 's (husband/wife), did . . . have any other** (Read asset types)?

<b>4318</b>	1 <input type="checkbox"/> Yes
	2 <input type="checkbox"/> No — <i>SKIP to next ISS Code or Check Item P1, page 45</i>

**b. What is your best estimate of the total amount of interest . . . earned on these** (Read asset types) **during the 4-month period?**

<b>4320</b>	\$	.	<b>00</b>	— <i>SKIP to next ISS Code or Check Item P1, page 45</i>
	x3 <input type="checkbox"/> None — <i>SKIP to next ISS Code or Check Item P1, page 45</i>			
	x1 <input type="checkbox"/> DK			
	x2 <input type="checkbox"/> Ref. — <i>SKIP to next ISS Code or Check Item P1, page 45</i>			

**c. What is your best estimate of the average amount that . . . had in these** (Read asset types) **during the 4-month period?**



<b>4322</b>	\$	.	<b>00</b>	— <i>SKIP to next ISS Code or Check Item P1, page 45</i>
	x1 <input type="checkbox"/> DK			
	x2 <input type="checkbox"/> Ref. — <i>SKIP to next ISS Code or Check Item P1, page 45</i>			

**d. If I were to call back later would you be able to provide me with an estimate of the average amount? (This information is especially important for the purposes of this survey.)**

<b>4324</b>	1 <input type="checkbox"/> Yes — <i>Mark Callback Summary and Reminder Card, Item 6</i>	} <i>SKIP to next ISS Code or Check Item P1, page 45</i>
	2 <input type="checkbox"/> No	

NOTES



Section 3 — AMOUNTS (Continued)		
Part C — OTHER INTEREST-EARNING ASSETS (ISS Codes 104, 105, 106 and 107)		
<b>CHECK ITEM A11</b>	Asset types owned. Mark (X) all that apply.	<div>4400</div> <div>4402</div> <div>4404</div> <div>4406</div> <div>1 <input type="checkbox"/> ISS Code 104 — Money Market funds</div> <div>2 <input type="checkbox"/> ISS Code 105 — U.S. Government securities</div> <div>3 <input type="checkbox"/> ISS Code 106 — Municipal or corporate bonds</div> <div>4 <input type="checkbox"/> ISS Code 107 — Other interest-earning assets — Specify <div></div></div>
<b>1. Earlier you said that ... owned (Read names of owned assets).</b>		
<b>CHECK ITEM A12</b>	Interview status of ...'s spouse.	<div>4408</div> <div>1 <input type="checkbox"/> No spouse in household — SKIP to 3b</div> <div>2 <input type="checkbox"/> Interview for spouse not yet conducted</div> <div>3 <input type="checkbox"/> Interview for spouse already conducted — SKIP to 3a</div>
<b>2a. Did ... own any of these jointly with ...'s (husband/wife)?</b>		<div>4410</div> <div>1 <input type="checkbox"/> Yes</div> <div>2 <input type="checkbox"/> No — SKIP to 3b</div>
<b>b. What is your best estimate of the total amount of interest earned on these jointly held (Read asset types) during the 4-month period?</b>		<div>4412</div> <div>\$ <div></div> . <div>00</div> — SKIP to 3a</div> <div>x3 <input type="checkbox"/> None — SKIP to 3a</div> <div>x1 <input type="checkbox"/> DK</div> <div>x2 <input type="checkbox"/> Ref. — SKIP to next ISS Code or Check Item P1, page 45</div>
<b>c. What is your best estimate of the average amount that ... and ...'s (husband/wife) had in these jointly held (Read asset types) during the 4-month period?</b> <div>★</div>		<div>4414</div> <div>\$ <div></div> . <div>00</div> — SKIP to 3a</div> <div>x1 <input type="checkbox"/> DK</div> <div>x2 <input type="checkbox"/> Ref. — SKIP to next ISS Code or Check Item P1, page 45</div>
<b>d. If I were to call back later would you be able to provide me with an estimate of the average amount? (This information is especially important for the purposes of this survey.)</b>		<div>4416</div> <div>1 <input type="checkbox"/> Yes — Mark Callback Summary and Reminder Card, Item 7</div> <div>2 <input type="checkbox"/> No</div>
<b>3a. Besides any (Read asset types) owned jointly with ...'s (husband/wife), did ... own any other (Read asset types)?</b>		<div>4418</div> <div>1 <input type="checkbox"/> Yes</div> <div>2 <input type="checkbox"/> No — SKIP to next ISS Code or Check Item P1, page 45</div>
<b>b. What is your best estimate of the total amount of interest ... earned on these (Read asset types) during the 4-month period?</b>		<div>4420</div> <div>\$ <div></div> . <div>00</div> — SKIP to next ISS Code or Check Item P1, page 45</div> <div>x3 <input type="checkbox"/> None — SKIP to next ISS Code or Check Item P1, page 45</div> <div>x1 <input type="checkbox"/> DK</div> <div>x2 <input type="checkbox"/> Ref. — SKIP to next ISS Code or Check Item P1, page 45</div>
<b>c. What is your best estimate of the average amount that ... had in these (Read asset types) during the 4-month period?</b> <div>★</div>		<div>4422</div> <div>\$ <div></div> . <div>00</div> — SKIP to next ISS Code or Check Item P1, page 45</div> <div>x1 <input type="checkbox"/> DK</div> <div>x2 <input type="checkbox"/> Ref. — SKIP to next ISS Code or Check Item P1, page 45</div>
<b>d. If I were to call back later would you be able to provide me with an estimate of the average amount? (This information is especially important for the purposes of this survey.)</b>		<div>4424</div> <div>1 <input type="checkbox"/> Yes — Mark Callback Summary and Reminder Card, Item 8</div> <div>2 <input type="checkbox"/> No</div> <div>SKIP to next ISS Code or Check Item P1, page 45</div>
NOTES		

### Section 3 — AMOUNTS (Continued)

#### Part D — STOCKS AND MUTUAL FUND SHARES (ISS Code 110)

**1a.** Earlier you told me that . . . owned stocks or mutual fund shares. Did . . . receive any dividend checks during these 4 months? (Include checks made out jointly to . . . and . . . 's spouse.)

4500

- 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK } SKIP to 3a

**CHECK  
ITEM A13**

Interview status of . . . 's spouse.

4502

- 1 ☐ No spouse in household — SKIP to 2a  
2 ☐ Interview for spouse not yet conducted  
3 ☐ Interview for spouse already conducted — SKIP to 2a

**1b.** During the past 4 months how much was received in dividend checks made out jointly to . . . and . . . 's (husband/wife)?



4504

\$  .  00 — SKIP to 2a

- x3 ☐ None — SKIP to 2a  
x1 ☐ DK  
x2 ☐ Ref. — SKIP to next ISS Code or Check Item P1, page 45

**c.** If I were to call back later would you be able to provide me with an estimate? (This information is especially important for the purposes of this survey.)

4506

- 1 ☐ Yes — Mark Callback Summary and Reminder Card, Item 9  
2 ☐ No

**2a.** During this 4-month period, how much did . . . receive in dividend checks (in . . . 's name only)?



4508

\$  .  00 — SKIP to 3a

- x3 ☐ None — SKIP to 3a  
x1 ☐ DK  
x2 ☐ Ref. — SKIP to next ISS Code or Check Item P1, page 45

**b.** If I were to call back later would you be able to provide me with an estimate? (This information is especially important for the purposes of this survey.)

4510

- 1 ☐ Yes — Mark Callback Summary and Reminder Card, Item 10  
2 ☐ No

**3a.** (Besides the money that . . . received in dividend checks) did . . . earn any (other) dividends that were credited against a margin account or automatically reinvested?

4512

- 1 ☐ Yes  
2 ☐ No  
x1 ☐ DK } SKIP to next ISS Code or Check Item P1, page 45

**CHECK  
ITEM A14**

Interview status of . . . 's spouse.

4514

- 1 ☐ No spouse in household — SKIP to 3c  
2 ☐ Interview for spouse not yet conducted  
3 ☐ Interview for spouse already conducted — SKIP to 3c

**3b.** During the 4-month period how much of these kinds of dividends did . . . earn jointly with . . . 's (husband/wife)?

4516

\$  .  00

- x3 ☐ None  
x1 ☐ DK  
x2 ☐ Ref. — SKIP to next ISS Code or Check Item P1, page 45

**c.** During the 4-month period, how much of these kinds of dividends did . . . earn (in . . . 's name only)?

4518

\$  .  00

- x3 ☐ None  
x1 ☐ DK  
x2 ☐ Ref.

} SKIP to next ISS Code or Check Item P1, page 45

NOTES

Section 3 — AMOUNTS (Continued)	
Part E — RENTAL INCOME (ISS Code 120)	
<b>1. Earlier you told me that . . . owned some rental property.</b>	
<b>CHECK ITEM A15</b>	Interview status of . . . 's spouse. <div>4600 1 <input type="checkbox"/> No spouse in household — SKIP to 3a 2 <input type="checkbox"/> Interview for spouse not yet conducted 3 <input type="checkbox"/> Interview for spouse already conducted — SKIP to 3a</div>
<b>2a. Did . . . receive any rental income from property owned jointly by . . . and . . . 's (husband/wife)?</b> Include only property owned entirely by couple. <div>4602 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 3a</div>	
<b>b. About how much was received in gross rent from this property during the 4-month period?</b> <div>4604 \$ <input type="text"/> . <input type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref. — SKIP to next ISS Code or Check Item P1, page 45</div>	
<b>c. What is your best estimate of the amount that was cleared after expenses?</b> Enter \$1 in amount box if respondent reports "broke even." <div>4606 \$ <input type="text"/> . <input type="text"/> 00 x3 <input type="checkbox"/> None x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref. — SKIP to next ISS Code or Check Item P1, page 45 4608 x4 <input type="checkbox"/> Lost money — Enter amount of loss in box</div>	
<b>3a. Did . . . receive rental income from property owned entirely in . . . 's own name?</b> <div>4610 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 4a</div>	
<b>b. About how much was received in gross rent from this property during the 4-month period?</b> <div>4612 \$ <input type="text"/> . <input type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref. — SKIP to next ISS Code or Check Item P1, page 45</div>	
<b>c. What is your best estimate of the amount that was cleared after expenses?</b> Enter \$1 in amount box if respondent reports "broke even." <div>4614 \$ <input type="text"/> . <input type="text"/> 00 x3 <input type="checkbox"/> None x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref. — SKIP to next ISS Code or Check Item P1, page 45 4616 x4 <input type="checkbox"/> Lost money — Enter amount of loss in box</div>	
<b>4a. Did . . . receive any rental income from property owned jointly with others? (Not including property owned entirely by . . . and . . . 's spouse.)</b> <div>4618 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to next ISS code or Check Item P1, page 45</div>	
<b>b. What is your best estimate of . . . 's share of the amount cleared on this property during the last 4 months?</b> Enter \$1 in amount box if respondent reports "broke even." <div>4620 \$ <input type="text"/> . <input type="text"/> 00 x3 <input type="checkbox"/> None x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref. 4622 x4 <input type="checkbox"/> Lost money — Enter amount of loss in box</div> <div>SKIP to next ISS Code or Check Item P1, page 45</div>	
NOTES	

Section 3 — AMOUNTS (Continued)			
Part F — MORTGAGES, ROYALTIES AND OTHER FINANCIAL INVESTMENTS (ISS Codes 130, 140, and 150)			
CHECK ITEM A16	Asset types owned. Mark (X) all that apply.	4700 4702 4704	1 <input type="checkbox"/> ISS Code 130 — Mortgages 2 <input type="checkbox"/> ISS Code 140 — Royalties 3 <input type="checkbox"/> ISS Code 150 — Other financial investments
CHECK ITEM A17	Is ISS Code 130 marked in Check Item A16?	4706	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 3
CHECK ITEM A18	Interview status of ...'s spouse.	4708	1 <input type="checkbox"/> No spouse in household — SKIP to 2b 2 <input type="checkbox"/> Interview for spouse not yet conducted 3 <input type="checkbox"/> Interview for spouse already conducted — SKIP to 2a
1a.	Earlier you said ... held a mortgage. Did ... own this jointly with ...'s spouse?	4710	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 2b
b.	During the past 4 months how much interest was paid to ... and ...'s spouse by the borrower?	4712	<div>\$ <input type="text"/> . <input type="text"/> 00</div> <div>x3 <input type="checkbox"/> None x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</div>
2a.	(Besides these jointly held mortgages), did ... hold any mortgages in ...'s own name?	4714	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to Check Item A19
b.	(Earlier you said that ... held a mortgage.) During the past 4 months how much interest was paid to ... by the borrower?	4716	<div>\$ <input type="text"/> . <input type="text"/> 00</div> <div>x3 <input type="checkbox"/> None x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</div>
CHECK ITEM A19	Is ISS Code 140 or 150 marked in Check Item A16?	4718	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to Check Item P1
3.	Earlier you said ... had (Read asset types). During the past 4 months, how much income did ... receive from these (Read asset types)?  If income was shared, count only ...'s share.	4720  4722	<div>\$ <input type="text"/> . <input type="text"/> 00</div> <div>x3 <input type="checkbox"/> None x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref. x4 <input type="checkbox"/> Lost money — Enter amount of loss in box</div>
NOTES			

## Section 4 – PROGRAM QUESTIONS

<b>CHECK ITEM P1</b>	Is this the reference person's questionnaire?	<b>4800</b>	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No — <i>SKIP to section 5, page 46</i>
	<b>1 a.</b> The government has an energy assistance program which helps pay heating and cooling costs. This assistance can be received directly by the household or it can be paid directly to the electric or gas company, fuel dealer, or landlord. Has this household received assistance of this type during the past 4 months?	<b>4816</b>	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No } <i>SKIP to Check Item P2</i> <input type="checkbox"/> x1 DK
	<b>b.</b> Was this assistance received in the form of checks, coupons or vouchers sent to this household or were the payments sent directly to a utility company, fuel dealer, or landlord? <i>Mark (X) all that apply.</i>	<b>4818</b> <b>4820</b> <b>4822</b>	<input type="checkbox"/> 1 Checks sent to household <input type="checkbox"/> 2 Coupons or vouchers sent to household <input type="checkbox"/> 3 Payments sent directly to utility company, fuel dealer, or landlord
	<b>c.</b> What was the total amount of the energy assistance received by this household during the past 4 months?	<b>4824</b>	\$ <input style="width: 80px;" type="text"/> . <input style="width: 40px;" type="text"/> 00 <input type="checkbox"/> x1 DK
<b>CHECK ITEM P2</b>	Are there any children 5 to 18 who live in the household?	<b>4826</b>	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No — <i>SKIP to section 5, page 46</i>
	<b>2 a.</b> Do any of the children in this household usually eat a complete hot lunch offered at school?	<b>4828</b>	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No — <i>SKIP to section 5, page 46</i>
	<b>b.</b> How many children?	<b>4830</b>	<input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> Children
	<b>c.</b> Do any of the children receive free or reduced-price lunches this school year because they qualified for the Federal School Lunch Program?	<b>4832</b>	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No — <i>SKIP to 2f</i>
	<b>d.</b> How many children?	<b>4834</b>	<input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> Children
	<b>e.</b> Are the lunches free or are they reduced-price? <i>Mark (X) all that apply.</i>	<b>4836</b> <b>4838</b>	<input type="checkbox"/> 1 Free <input type="checkbox"/> 2 Reduced-price
	<b>f.</b> Do any of the children receive free or reduced-price school breakfasts this school year?	<b>4840</b>	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No — <i>SKIP to section 5, page 46</i>
	<b>g.</b> How many children?	<b>4842</b>	<input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> Children
	<b>h.</b> Are the breakfasts free or are they reduced-price? <i>Mark (X) all that apply.</i>	<b>4844</b> <b>4846</b>	<input type="checkbox"/> 1 Free <input type="checkbox"/> 2 Reduced-price

NOTES